



Aurora Health Management, LLC

March 12, 2013

Marcus & Millichap  
Attn: Joshua Jandris and Mark Myers  
8750 W. Bryn Mawr, Suite 650  
Chicago, IL 60631

Re: RFP for Citizens Care & Rehabilitation Center and Montevue Assisted Living Facility,  
Proposal by Aurora Health Management, LLC  
8227 Cloverleaf Drive, Suite 309, Millersville, MD 21108  
Stanley H. Snow, President, (410) 729-8406.

1. This proposal is being submitted by Aurora Health Management, LLC ("Aurora") for a newly created subsidiary or affiliate of Aurora ("Buyer") to acquire Citizens Care & Rehabilitation Center, a 170 bed skilled nursing facility, and Montevue Assisted Living Facility, a 75 unit assisted living facility, located at 1910 & 1920 Rosemont Avenue, Frederick, Maryland 21702 (the "Facility") from Frederick County, Maryland and the owner(s) of any and all real and personal property used in connection with the Facility (collectively the "Seller"). The sale shall be "as is" and Seller shall make no guarantee or warranty as to the condition of the Facility. The remaining term of the standard component warranties provided through the General Contractor associated with the construction of the Facility will be assigned if a purchase agreement is executed.
2. Any sale shall be subject to approval by the Frederick County Board of Commissioners and related parties.
3. Aurora currently owns and operates seven (7) skilled nursing facilities in three (3) states: Maryland, Connecticut and New Hampshire. The salary and benefit levels are designed to meet the specific needs of the employees in each community. Aurora has performed a detailed comparison of the current salary and benefit levels offered at the Facility versus those offered at Aurora's various facilities. We have determined the salary and benefit levels offered at Aurora facilities are extremely competitive, and in many cases better than what is currently offered at the Facility. Although it is necessary to make some changes to benefits when we acquire a new facility, it is always our goal to keep those changes to a minimum. Aurora offers the following benefits to employees in current operations: Medical, Dental, Vision, 401(k) with company match, Basic Life/AD&D, Basic STD, Voluntary Life - Employee, Spouse, Child(ren), Voluntary Long Term, Disability, Accident Insurance, Critical Illness, Whole Life Insurance, Vacation, Sick, Paid Time Off, Free Days, and Paid Holidays. When Aurora acquires a new facility, it is always our intention to maintain continuity and retain the vast majority of employees. In fact, historically Aurora has retained well over 99% of the employees in facilities we have acquired. Aurora has never lowered an existing employee's salary. Prior to starting Aurora, the principals of Aurora owned and operated Millennium Health Services, LLC ("Millennium"). Millennium owned and operated nine skilled nursing homes in the State of Maryland. These nursing homes were in Baltimore City, Anne

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Arundel County, Montgomery County, Howard County, and Prince Georges County. Millennium also retained over 99% of existing employees and never lowered their salaries.

4. Aurora is privately held by Robert Owens and Stanley Snow. With nearly a half of a century of experience in Long Term Care, Aurora Health Management, LLC is a comprehensive management team that has a proven track record of managing, developing and enhancing long term care properties. The Aurora team has developed programs to enhance every aspect of operations within a long term care setting;

- Operations
- Clinical
- Financial
- Survey Problems
- Community
- Renovation Development
- Marketing
- Quality Assurance
- Risk Management
- Accounting and Budgeting
- Compliance programs
- Human resources

#### General Description

Unlike many large Long Term Care Management firms, Aurora Health Management can offer the talents of a management team who, in their own area of specialty, will provide daily hands-on management in the operation and administration of the Facility. Our management approach is based on the belief that good management requires presence, visibility, attention to detail, and a thorough working knowledge of even the most mundane aspects of day-to-day operations. For example, the Director of Clinical Services, would train and supervise the nursing staff and provide assistance with infectious control at the facility level, clinical program development, survey preparation and other quality assurance initiatives that are all consistent with the Facilities policies and procedures. The Chief Executive Officer would supervise all operations and work with the Facility Administrator and all department heads directly in developing staff, controlling labor expense and supply costs, implementing quality assurance measures and the delivery of all patient services.

Our services would begin with the development of a plan for each department in the Facility, their staffing levels, policies and procedures, quality assurance protocols, budgets, and community outreach.

#### Staff Development, Training and Supervision

The most valuable asset of a nursing home organization is its employees, however, it is also the

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greatest single area where excessive cost can financially ruin an otherwise profitable facility. Labor costs typically make-up about 70% to 75% of a long term care facility's total expenses. Thus, at a time when the nursing home industry is facing increasing employee turnover and skyrocketing staffing costs, the management of personnel is critical. More importantly, a stable and motivated staff is the key to quality assurance and good patient care. Daily supervision and direct hands-on leadership is the only way in which a nursing staff, which is consistently subject to Federal and State surveys and the daily pressures of care giving, can be motivated to work together and asked to implement new programs to ensure the quality of patient care.

The benefit that Aurora Health Management offers in this area is the experience of its principals in working directly with nursing home staff and their proven ability to motivate, train and retain staff, implement new programs and contain labor costs, while maintaining the quality of patient care and services.

Although we believe the shortage of qualified and dedicated health care professionals will continue to be a critical issue, we do not believe it is an insolvable one. Recruitment and retention are objectives that are specifically accomplished by developing and involving a facility's employees in the management process, which ultimately will ensure stability and loyalty to the Center. Central to the process is the development of employee reviews, training and incentive programs to motivate the Center's employees, which results in less turnover and lower agency cost.

#### Quality Assurance and Survey Preparation

As operators who have managed, leased, and owned Long Term Care Facilities nationwide, we know the needs of our residents and are very familiar with all the state and federal regulations governing the care of the elderly. When surveyors visit Facilities, ownership is generally at the mercy of their subjective observations and determinations of the management systems.

As part of Aurora's program, we would seek to implement quality assurance measures that would help the Center's staff to prepare for all surveys so that no surprises arise when these reviews occur. Our Quality Assurance team, directed by the Vice President of Operations, and the Director of Clinical Services would review policies and procedures, patient charts, the delivery of patient care and regularly conduct mock surveys and in-service training courses to assure the Center's staff is performing as expected and prepared for all reviews.

Our clients can then rest assured that daily care and the operation at the Facility level is not affected by such routine inspections.

#### Patient Services and Quality of Life Programs

Quality of care is the number one factor that families and residents consider when entering a nursing center. The long term care of the elderly demands attention to every detail of their lives, including diet, medication, therapy, recreational activity, social opportunities, psychological support and spiritual guidance. Our primary objective in this area is to provide the best possible nursing care to residents in a way which respects the human dignity of each individual. We care about every resident as an individual person, with individual needs, hopes and concerns, and we assist people in taking an active role in their own lives and the community around them. The

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importance of stimulation and variety in a resident's daily routine is of utmost importance to a resident. By developing an exciting spectrum of programs in the Center's Activities Department, residents participate in activities which are enjoyable and offer therapeutic benefits. In addition, we would examine and develop support services as needed, which may include medical, dental, physical therapy and recreational services.

#### Environmental Services and Physical Plant Maintenance

Image is an important factor when someone is evaluating a nursing center, and first appearances always leave a lasting impression. Hence an Environmental Services Program that ensures a clean and safe environment can pay many dividends in the short and long run. Establishing daily mechanisms and routine cleaning of patients' rooms can make everyone associated with a facility feel good about themselves and their living and working environment. Aurora continuously monitors this in addition to implementing thorough preventative maintenance systems so that all equipment and facilities are in "tip-top" working order. In addition, with the implementation of our Environment Services Plan, the Center's life-safety issues are always kept in control, and its living environment is always clean and safe.

In order to properly maintain the Facility's physical plant, equipment and environmental condition, we would directly train, supervise and assist the Center's staff on-site. We will also help to ensure that the Center is in compliance with all applicable federal, state, and local laws and regulations regarding environmental concerns and fire safety codes.

#### Food Service Management

A properly directed Food Service Management Program is crucial to maintaining the health and well-being of each resident. Each resident is unique in his/her likes and dislikes. Ensuring satisfaction requires careful attention to individual preferences. By communicating regularly with each resident and implementing systems which coordinate taste preference with a resident's special dietary needs and their care plan, we work to have each resident thoroughly enjoy their dining experience.

Through years of experience in providing food services to the elderly, we have learned how to carefully balance their needs and still manage these services efficiently. Like the other departments in the Center, the Dietary Department is labor intensive and must be closely monitored for quality assurance and cost control, and managed daily.

#### Admissions, Marketing and Census Development

Ensuring the stabilization of the Center's census requires developing a well defined marketing program which positions the Center correctly in the market. The Center will require a different marketing approach than the traditional approaches used by most large chains to attract patients. These nursing homes typically stress the differences in the physical plant and furnishings of their homes verse their competitors, and target their marketing efforts to the general public. We have found the predominate concern of decision makers is not aesthetics but reputation, patient care

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and services. Consequently, Aurora Health Management targets our marketing efforts towards those persons or organizations which influence these decision makers, namely Hospital Administrators and Discharge Planners, Home Health Agencies, Insurance Companies, Health Maintenance Organizations, Physicians, Senior Citizen Groups, etc. These are the professionals and organizations that decision makers seek information from in making their emotional decision, not typically a printed ad or other traditional mass marketing information source.

The key to this marketing effort is developing and promoting an image of the Center to the community of a high quality, resident oriented nursing home, which offers personalized nursing care, that caters to the specific needs of each resident. This begins with the proper training of the Center's staff and the fostering of an attitude geared to providing quality services to ensure a warm and home-like atmosphere. In addition, through the development of quality controls, the Center's reputation can be developed, leading to greater patient admissions.

#### Purchasing Management and Cost Control Programs

Supply costs, including food, housekeeping, laundry, dietary, office and maintenance supplies can contribute approximately 10% to overall expenses. Therefore, efficient and practical purchasing practices can positively impact projected cash flows and help to ensure the quality of services in all the Facility's departments. Aurora's program requires that all department heads be held responsible and accountable for meeting monthly financial budgets. We carefully train all department heads to monitor their staffing patterns (labor costs), and in techniques to ensure proper ordering and usage of supplies and services. In addition, all service and supply contracts will be reviewed for quality assurance and competitive pricing and where possible.

#### Payor Program Administration and Reimbursement

One area of particular expertise that we offer as part of our program concerns the administration and management of the complex third-party payor/reimbursement programs i.e., Medicaid, Medicare, VA, and private third-party payors. Proper administration and processing of these programs requires constant attention in order to maintain a facility's compliance with program regulations, as well as to ensure timely and accurate reimbursement and management of cash flow. We have found that in many facilities patients are not evaluated and reviewed in order to update the status of their care needs through the Minimum Data Set. Many times this results in nursing staff providing added care, as is their duty, without the proper level of reimbursement for the facility. Thus, one area that we would carefully examine initially and on a regular basis, is the classification and documentation of each resident's status under these programs to ensure the proper level of nursing care and reimbursement.

#### Conclusion

Aurora Health Management has the operational expertise and experience of assisting our facilities with the identification of needs and implementation of working plans to solve real problems. Our value isn't in the identification of issues, more so, it is in the implementation of solutions and the

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skill to operate and attain success. Our experience in the industry including crisis management, community outreach, and operational management, allows Aurora to be a flexible partner in a climate that requires flexibility.

5. Aurora shall give preference to admission of Frederick County residents, to the extent permitted by law. Aurora will also give preference to admission of residents from MALF to CCRC and from CCRC to MALF. Aurora strongly believes that each nursing home and assisted living facility is an integral part of the community in which it is located. The residents, staff and family members of each facility must work together in order to be successful. Aurora, as part of the community based health care delivery system, will be a responsible member of the Frederick community. Aurora's historical case mix is as follows:

Medicaid	80%
Medicare	11%
Private	3%
Hospice	2%
Private Ins.	3%
VA	1%

Aurora has specific policies, procedures and programmatic training to provide care to all post-acute residents. Some examples are as follows: (i) Aurora has a dedicated Alzheimer's unit in its Manokin and New Britain facilities; (ii) Aurora has a sub-acute cardiac program in its New Britain facility; (iii) Aurora has a short term Rehabilitation program in its Norwalk facility; and (iv) Aurora has a Bariatric program at its East Hartford and Manokin facilities. Aurora will work closely with Frederick Memorial Hospital to reduce re-admissions to the hospital. Aurora would implement it's discharge pathways to local acute care providers to assist in reducing hospital re-admissions. This would help the acute care providers maintain higher levels of Medicare payments. Aurora would implement Aurora's Cardiac Sub-Acute program with special focus on cardio-pulmonary heart failure and pharmaceutical management

The Aurora team has experience operating a 40 bed ventilator unit in the State of Maryland.

Aurora does not focus on "Quality Mix." Rather, Aurora has been successful by controlling expenses and admitting Medicaid and Medicaid Pending residents. If Aurora buys CCRC, we will continue to operate with this philosophy of admissions. In order to identify community needs and promote the programs developed for this Facility, Aurora would meet with the Resident Council, Family Members, and various social clubs; including but not limited to, Rotary Club, Chamber of Commerce, Lions Club, Department of Aging, Knights of Columbus, and the local department of health.

6. Aurora shall comply with all federal OBRA regulations pertaining to safe and appropriate discharge of current residents. In the past, Aurora has only discharged residents when their condition or status was no longer appropriate for care in a skilled nursing facility. As stated above,

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residents of MALF will be given preference to admission to CCRC, and residents of CCRC will be given preference to admission to MALF. As will be discussed in greater detail below, Aurora is proposing a 48 month lease back to Frederick County for MALF. During that period, the attrition of County subsidized residents of the MALF would bring the overall occupancy mix to a level which would create a viable operation. This will also enable the County to manage the retention, relocation and/or attrition transfer of the County subsidized residents of the MALF, in accordance with the social policy of Frederick County.

7. Buyer has purchased, and successfully operates, seven (7) nursing homes in three (3) different states over the past 28 months. Aurora currently owns and operates 1044 skilled nursing beds, with annual revenue in excess of \$100 million. These facilities include: Aurora Senior Living of Manokin (135 beds), Aurora Senior Living of Bucks Hill (90 beds), Aurora Senior Living of Cromwell (180 beds), Aurora Senior Living of East Hartford (145 beds), Aurora Senior Living of Norwalk (150 beds), Aurora Senior Living of New Britain (282 beds), and Aurora Senior Living of Derry (62 beds). Prior to starting Aurora Health Management in 2010, Mr. Owens and Mr. Snow owned and operated Millennium Health Services, which consisted of nine skilled nursing facilities in the State of Maryland. Over the past 16 years, the principals of Aurora have signed Letters of Intent to purchase 16 nursing homes. They have closed on each and every purchase in a timely manner. Seven of those facilities were purchased from Hospital Systems.

The profiles of Robert Owens and Stanley Snow are stated below:

**Robert G. Owens, NHA**

Robert G. Owens, is the Chief Executive Officer and co-founder of Aurora Health Management, LLC. Mr. Owens has 25 years of experience in the health care field, and obtained his license as a nursing home administrator in the State of Maryland in 1991. Formerly, as President and Chief Operating Officer for Millennium Health Services, Mr. Owens was responsible for the day to day operations of the facilities owned by Millennium Health Services and for those facilities managed on behalf of its clients. He participates in the operational and fiscal accountability of each account and is the liaison between the facility and the owners.

Before joining Millennium Health Services, Mr. Owens was Regional Vice President of Operations and Sub-acute Services for Mariner Health, Mid Atlantic, formerly Allegis Health Services. Mr. Owens developed the Hospital Based Sub acute program for Mariner Mid Atlantic and successfully implemented the program at the University of Maryland Medical System and at Kernan Hospital. Kernan's sub-acute unit is the only hospital based transitional care unit that is JACHO sub-acute and CARF accredited in the state of Maryland. He was responsible for 700 long term care beds, 3 hospital based sub-acute units and a long term care facility with an in-house dialysis unit. Prior to joining Mariner Mid Atlantic in 1995, Mr. Owens spent 7 years with Diversified Health Services, one of the leading providers of sub-acute care in the country. Mr. Owens had responsibility for facilities and sub-acute units from Fort Lauderdale, Florida to Quincy, Massachusetts.

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Mr. Owens was member of the National Sub-acute Care Association where he sat on the financial lobby board in 1996. He has participated in several speaking engagements over the years on several topics including the post-acute continuum, developing hospital based sub-acute units, and marketing for long term care. He was a board member with H.F.A.M.; Health Facilities Association of Maryland and served as its Chairman from 2001 to 2003.

Mr. Owens has been licensed as a nursing home administrator in the states of Maryland, New Jersey, Pennsylvania, and Virginia. He is a graduate of Slippery Rock University and has continued his education with studies at Seton Hall University in Orange, New Jersey and Georgetown University.

#### Stanley H. Snow

Stanley Snow, a native of Silver Spring, Maryland, is the President and co-founder of Aurora Health Management, LLC. Mr. Snow was a principal of Millennium Health Services, LLC, where he acted as General Counsel and Vice President of Development. With Millennium, Mr. Snow was responsible for all legal matters regarding Millennium Health Services and its affiliates, including, coordinating litigation, overseeing all labor and employment matters, and managing regulatory affairs. His duties also included business development, acquisition management, negotiation of managed care contracting, risk management, oversight of renovations and construction management. Mr. Snow grew Millennium to nine nursing homes in the State of Maryland, with over 1200 long-term care beds, and annual revenue in excess of \$70 million, before selling the company to Trans Healthcare, Inc. ("THI") in November, 2002. Mr. Snow stayed on with THI as General Counsel and Vice President of Development until December, 2004.

Mr. Snow is an attorney, formerly with the law firm of Wortman and Nemeroff, P.A., where he specialized in corporate law, health care and business planning. While at Wortman & Nemeroff, Mr. Snow worked closely with various private and public companies in developing and financing long-term care facilities, and structuring corporate, public and private financings as well as complex real estate financings.

Prior to joining the firm, Mr. Snow served as General Counsel and Director of Project Development of Allegis Health Services and Mariner Health, Mid Atlantic. While with Allegis and Mariner Health, Mr. Snow coordinated all phases of development related to the acquisition and building of a 157 bed nursing home, as well as a 100 bed addition to an existing nursing home. Mr. Snow was responsible for all legal matters concerning over 1700 long-term care beds. He successfully negotiated and conducted transactions for the purchase and sale of numerous long-term care facilities.

Mr. Snow is a member of the Maryland Bar, the District of Columbia Bar, and the United States District Court for the District of Maryland. He is a graduate of the Georgia Institute of Technology,

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where he received a Bachelors of Electrical Engineering degree. Mr. Snow received his law degree from the Catholic University of America.

Mr. Snow currently serves on the Board of Trustees of Suburban Hospital, Johns Hopkins Medicine. Mr. Snow served on the Maryland State Board of Nursing Home Administrators for eight years, the Johns Hopkins Medicine Finance Committee, the Suburban Hospital Healthcare System Board (Chairman of the Finance Committee) and the Suburban Hospital Foundation Board. Mr. Snow served on the Boards of Fidelity & Trust Financial Corporation, and Fidelity & Trust Bank from their inception in 2003 until 2008. He served as Chairman of the Board of Fidelity & Trust Bank from April 2004 to March 2005.

8. The following is the organizational chart for Aurora Health Management, LLC.

Title	Employee
CEO	Bob Owens
President	Stan Snow
Director of Finance	Bill Hegel
VP of Operations	Calvin Vain
VP of Clinical Services	Doreen Trainor
Director of Reimbursement	Chris Owens
IT Director	Tom Oakes
AR Specialist	Tia Johnson
Project Manager	John Owens
Director of Managerial Accounting	Barbara Kitchen
AP Specialist	Barbara Capes
AP Specialist	Denise Cheatham
Reception/AP	Rachel Evans
Administrative Assistant	Christina Jones
Regional Finance Manager	Susan Galasso
Regional Finance Manager	Drew Hall

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Director of Clinical Reimbursement	Reba Stoddard
Director of Clinical Reimbursement	Sherry Croll
Regional Human Resource	Rosa Hernandez
Director of Quantitative Nursing	Beverly Leftwich
Regional Dir. Of Clinical Services	Betsy Olsavsky
Regional Dir. of Clinical Services	Dan McGrail
Director of Marketing	Jennifer Carnovale
Regional Dir. of Operations	Lara Alatise
Regional Nurse	Janet Jackson
Regional Dietitian	Shana Griffin

9. Aurora would comply with all municipal, County, State and Federal rules, regulations, mandates and laws, relative to the sale of a nursing home and relative to the present nursing home labor force and employees. Over the past 16 years, the principals of Aurora have purchased ten (10) nursing homes in the State of Maryland.

10. As to the sale of the Facility, Buyer requires only the following contingencies to closing:
- Buyer having secured all appropriate licenses and necessary regulatory approvals to operate the Facility.
  - The Facility shall be in substantial compliance with the Maryland Department of Health and Mental Hygiene and CMS.
  - Buyer's lender may require a new Phase I be completed to meet their underwriting requirements, or they may accept assignment of the Phase I which has been provided.
  - The parking lot in the rear of the Facility will be completed.

Buyer will not require a financing contingency. The principals of Aurora, Stanley Snow and Robert Owens, will invest the funds necessary to close the transaction. Both Mr. Snow and Mr. Owens have adequate funds available to satisfy this requirement. A copy of Mr. Snow's brokerage account statement and Mr. Owens' brokerage account statement are attached hereto as evidence of such available funds. Further, Buyer has a financing commitment from CapitalSource Bank for up to 80% of the acquisition price. Please see attached letter dated March 11, 2013.

11. Over the past 16 years, the principals of Aurora have successfully obtained all licenses and regulatory approvals necessary to operate ten (10) nursing homes in the State of Maryland. Most recently, in October 2011, Aurora purchased a 135 bed skilled nursing facility in Princess Anne, Maryland. Aurora has also purchased five (5) nursing homes in Connecticut and one (1) in New

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Hampshire. We have also operated two (2) assisted living facilities in the State of Maryland. Based in Millersville, Maryland, Aurora has vast experience and knowledge regarding the regulatory requirements for skilled nursing and assisted living facilities.

12. Attached please find the most recent aggregate Medicare.gov Star Rating for each facility Aurora owns and operates.

13. The Purchase Price for the Facility shall be Thirty Million (\$30,000,000) Dollars. Aurora proposes to lease MALF to Frederick County, Maryland for 48 months (the "Lease Term"). The rent in year one would be \$1.25 million, with a 3% escalator in each year thereafter. During the Lease Term, Aurora will provide Management Services to MALF, for which the County will pay a Management Fee in the amount of 3% of Gross Revenues. During the Lease Term, MALF will not admit any additional County subsidized residents.

Enclosed as an earnest money deposit please find a cashier's check in the amount of Two Hundred Thousand (\$200,000) Dollars, payable to "Frederick County, Maryland." If Aurora is not chosen as the Purchaser, please return the \$200,000 proposal security to Aurora Health Management, 8227 Cloverleaf Drive, Suite 309, Millersville, MD 21108.

Thank you for your time and attention to this matter. Please do not hesitate to contact me with any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read "Stanley H. Snow".

Stanley H. Snow

President

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**REFERENCES**

1. Brian A. Gragnolati                      Serves on Suburban Hospital Boards with Mr. Snow.  
Senior Vice President  
Johns Hopkins Health System  
600 North Wolf St., Billings 414  
Baltimore, MD 21287  
[bgragno1@jhmi.edu](mailto:bgragno1@jhmi.edu)  
office 410-955-9193, cell 301-943-2231
2. William Vaughan, R.N.                      Oversees all nursing homes in the State of Maryland.  
Chief Nurse  
Office of Health Care Quality  
Department of Health and Mental Hygiene  
Spring Grove Hospital Center  
Bland Bryant Building, 55 Wade Avenue  
Catonsville, Maryland 21228  
410-402-8140
3. Richard K. Matros                          Current Landlord on certain Aurora nursing homes.  
Chairman of the Board and Chief Executive Officer  
Sabra Health Care REIT, Inc.  
18500 Von Karman Avenue, Suite 550  
Irvine, California 92612  
[rmatros@sabrahealth.com](mailto:rmatros@sabrahealth.com)  
o (888) 393-8248, c (949) 769-9499
4. Rose McLellan                              In charge of licensing upon acquisition of nursing homes.  
License & Applications Supervisor  
Facility Licensing & Investigations Section  
State of Connecticut Department of Public Health  
410 Capitol Avenue - MS # 12HFC, P.O. Box 340308  
Hartford, CT 06134  
(860) 509-7444  
[Rose.c.mclellan@po.state.ct.us](mailto:Rose.c.mclellan@po.state.ct.us)
5. Amy Y. Heller                                Current Lender to Aurora.  
Managing Director, Healthcare Credit Group  
CapitalSource Bank  
5404 Wisconsin Avenue, Second Floor  
Chevy Chase, MD 20815  
301.841.2751 (o), 301.641.3633 (c)  
[aheller@capitalsource.com](mailto:aheller@capitalsource.com)

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tel: 301.841.2700  
[capitalsourcebank.com](http://capitalsourcebank.com)

March 11, 2013

**VIA ELECTRONIC MAIL**

Mr. Stanley Snow  
Aurora Health Management, LLC  
8227 Cloverleaf Drive, Suite 309  
Millersville, Maryland 21108

**Re: Financing for Acquisition of Citizens Care & Rehabilitation Center and  
Montevue Assisted Living Facility, Frederick, Maryland (collectively, the "Community")**

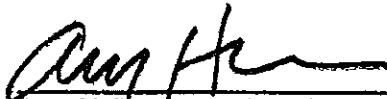
Dear Stanley:

We are pleased to advise you that CapitalSource Bank ("Lender") will consider providing a secured term loan (the "Loan") to Aurora Health Management, LLC or its single-purpose affiliate ("Borrower") for up to 80% of the acquisition price of the Community, subject to the satisfaction of Lender's customary underwriting and closing conditions, including those set forth on Schedule A to this letter.

We look forward to working with you on this transaction.

Regards,

**CAPITALSOURCE BANK**

By:   
\_\_\_\_\_  
Amy Heller, Managing Director



Mr. Stanley Snow  
Aurora Health Management, LLC  
March 11, 2013  
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## SCHEDULE A

### Lender Customary Closing Conditions

- Prior to or as of the date of closing (the "Closing Date") of the Loan: (a) there shall not have occurred or exist any Material Adverse Effect; (b) Lender shall have confirmed to its satisfaction the completeness, accuracy and continued validity of all facts, statements and financial information submitted by Borrower and its affiliates, including Aurora Health Management, LLC ("Sponsor"); (c) Lender shall have completed all underwriting and due diligence deemed necessary by Lender with respect to Sponsor, Borrower, the acquisition transaction relating to the Property (the "Acquisition") and the real and personal property serving as collateral, and the results of such due diligence shall have been satisfactory to Lender in its sole discretion; (d) there shall be no inquiries, investigations, surveys, proceedings or litigation pending or threatened which may materially adversely affect Borrower, Sponsor, the Acquisition, or the collateral to serve as security for the Loan; (e) Lender shall have received all internal credit committee approvals in Lender's sole discretion; and (f) Borrower shall possess all necessary and appropriate permits, licenses, consents, authorizations and approvals to conduct its business as contemplated to be conducted after the Acquisition.
- The term "Material Adverse Effect" means any event, change, effect, condition, obligation, liability or circumstance or any set of events, changes, effects, conditions, obligations, liabilities or circumstances which (i) has, had or would reasonably be expected to have any material adverse effect upon or change in (a) the Acquisition, (b) the legality, validity or enforceability of any document required to consummate the Acquisition or any Loan Document, (c) the perfection or priority of any lien granted to Lender under any Loan Document, (d) the value of any material portion of the collateral or (e) the business, operations, assets, liabilities, prospects, financial condition or results of operations of Sponsor, Borrower, or Borrower's subsidiaries, individually or taken as a whole, (ii) materially impairs, has materially impaired or would reasonably be expected to materially impair the ability of Sponsor or Borrower to consummate and/or perform their respective obligations under the documents giving effect to the Acquisition and/or the transactions under the Loan Documents, or (iii) constitute(s) a material disruption or material adverse change in financial, banking, or capital markets since the date of this letter as determined by Lender in its sole discretion
- Borrower, Sponsor and other applicable parties will execute and deliver to Lender on or before the Closing Date such loan agreements, security agreements, deeds of trust, mortgages, promissory notes, assignments, pledges, instruments, documents, certificates, materials, indemnities, opinions (including, without limitation, regulatory opinions) and assurances and other items (collectively, the "Loan Documents") as Lender may require or deem necessary or appropriate in its sole discretion, all of which shall be in form and content acceptable to Lender in its sole discretion.
- The Acquisition (other than the Loan) shall have been consummated on terms and conditions and in form and substance satisfactory to Lender in its reasonable discretion.

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## Nursing Home Profile

### General Information

#### AURORA SENIOR LIVING OF MANOKIN, LLC

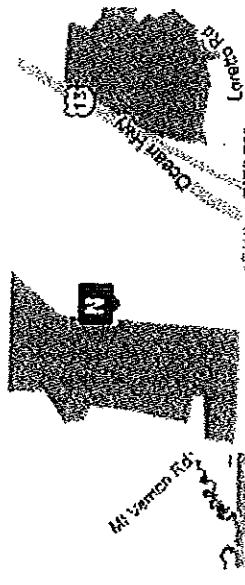
#### Nursing Home Information

11974 EDGEHILL TERRACE  
PRINCESS ANNE, MD 21853  
(410) 651-0011

Add to my Favorites  [Map and Directions !\[\]\(71ad931484746ee140d6966c6cfbb6e0\_img.jpg\)](#)

- 135 Certified Beds
- Participates in [?]: Medicare and Medicaid Ownership [?]: For profit - Corporation
- Not in a Hospital
- Has a Resident and Family Council

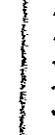
### Star Ratings Summary

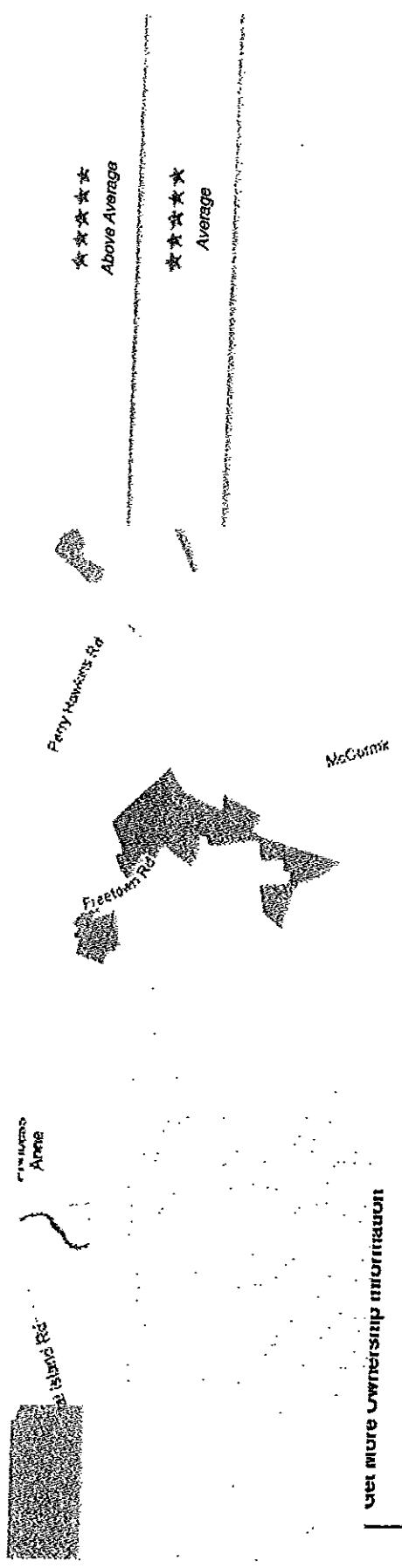


### Overall Rating [?]



### Health Inspection Rating [?]





Inspection Results

AURORA SENIOR LIVING OF MANOKIN, LLC

11974 EDGEHILL TERRACE  
PRINCESS ANNE, MD 21853  
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Overall Rating [?]

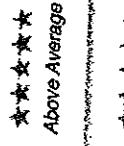
Health Inspections [?]

Date of last standard health inspection:

01/20/2012 View Full Report

Nursing Home Information

- 135 Certified Beds
- Participates in [?]: Medicare and Medicaid



Date(s) of complaint survey(s) within the past 15 months:

10/11/2012 [View Full Report](#)

08/30/2012 [View Full Report](#)

07/23/2012 [View Full Report](#)

01/31/2012 [View Full Report](#)

01/20/2012 [View Full Report](#)

Total number of Health Deficiencies:

13

Average number of Health Deficiencies in Maryland:

11.1

Average number of Health Deficiencies in the United States:

7.4

### Quality Care Deficiencies

[View Previous Inspections Summary](#)

Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm	Resident Affect
Provide necessary care and services to maintain the highest well being of each resident.	01/20/2012	03/03/2012	2 = Minimal harm or potential for actual harm	Few
Assist those residents who need total help with eating/drinking, grooming and personal and oral hygiene.	07/23/2012	08/16/2012	2 = Minimal harm or potential for actual harm	Few

### Resident Rights Deficiencies

<a href="#">View Previous Inspections Summary</a>
---

Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm	Resident Affect
<i>Property hold, secure and manage each resident's personal money which is deposited with the nursing home.</i>	01/31/2012	03/09/2012	<i>2 = Minimal harm or potential for actual harm</i>	Few
<i>Follow policies and procedures to convey the residents' personal funds to the appropriate party responsible after the resident's death.</i>	08/30/2012	10/31/2012	<i>1 = Potential for minimal harm</i>	Some
<b>Nutrition and Dietary Deficiencies</b>				
Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm	Resident Affect
<i>Store, cook, and serve food in a safe and clean way.</i>	10/11/2012	11/10/2012	<i>1 = Potential for minimal harm</i>	Many
<b>Pharmacy Service Deficiencies</b>				
Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm	Resident Affect
<i>1) Make sure that each resident's drug regimen is free from unnecessary drugs; 2) Each resident's entire drug/medication is managed and monitored to achieve highest well being.</i>	07/23/2012	08/16/2012	<i>2 = Minimal harm or potential for actual harm</i>	Few
<i>Maintain drug records and properly mark/label drugs and other similar</i>	07/23/2012	08/16/2012		Few

products according to accepted professional standards.

### **Environmental Deficiencies**

Inspectors determined that the nursing home failed to:

*Provide housekeeping and maintenance services.*

*Provide adequate and comfortable lighting levels in all areas.*

*Be designed, built, equipped, or well kept to protect the health and safety of residents, workers, and the public.*

*Have enough outside ventilation via a window or mechanical ventilation, or both.*

*Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.*

### **Administration Deficiencies**

Inspectors determined that the nursing home failed to:

*Keep accurate, complete and organized clinical records on each*

*2 = Minimal harm or potential for actual harm*

**View Previous Inspections Summary**

Survey Date	Date of Correction	Level of Harm	Resident Affect
10/11/2012	11/10/2012	1 = Potential for minimal harm	Many

Survey Date	Date of Correction	Level of Harm	Resident Affect
10/11/2012	11/10/2012	1 = Potential for minimal harm	Many

Survey Date	Date of Correction	Level of Harm	Resident Affect
10/11/2012	11/10/2012	1 = Potential for minimal harm	Many

Survey Date	Date of Correction	Level of Harm	Resident Affect
10/11/2012	11/10/2012	1 = Potential for minimal harm	Many

Survey Date	Date of Correction	Level of Harm	Resident Affect
10/11/2012	11/10/2012	1 = Potential for minimal harm	Many

**View Previous Inspections Summary**

Survey Date	Date of Correction	Level of Harm	Resident Affect
01/20/2012	03/03/2012	2 = Minimal harm or potential for actual harm	Few

resident that meet professional standards.

#### *How to Read a Deficiency Chart*

##### **Fire Safety Deficiencies**

##### **Automatic Sprinkler Systems in All Required Areas:**

**Total number of Fire Safety Deficiencies for this nursing home:**

**5**

**Average number of Fire Safety Deficiencies in Maryland:**

**3.6**

**Average number of Fire Safety Deficiencies in the United States:**

**3.5**

**Range of Fire Safety Deficiencies in Maryland:**

**0-17**

##### **Smoke Compartmentation and Control Deficiencies**

**Inspectors determined that the building did not have:**

**Survey Date**

**Date of Correction**

*View Previous Inspections Summary*

walls or barriers that prevent smoke from passing through and would resist fire for at least one hour.

**Survey Date**

**Date of Correction**

*View Previous Inspections Summary*

##### **Hazardous Area Deficiencies**

**Inspectors determined that the building did not have:**

**Survey Date**

**Date of Correction**

*View Previous Inspections Summary*

Construction that can resist fire for one hour or an approved fire extinguishing system.

**Survey Date**

**Date of Correction**

*View Previous Inspections Summary*

#### *View Previous Inspections Summary*

<b>Building Service Equipment Deficiencies</b>			
<i>Inspectors determined that the building did not have:</i>	<i>Survey Date</i>	<i>Date of Correction</i>	<i>Level of Harm</i>
<i>Resident Affect:</i>			
<i>Property protected cooking facilities.</i>	<i>01/30/2012</i>	<i>01/31/2012</i>	<i>2 = Minimal harm or potential for actual harm</i>
<i>View Previous Inspections Summary</i>			
<b>Furnishings and Decorations Deficiencies</b>			
<i>Inspectors determined that the building did not have:</i>	<i>Survey Date</i>	<i>Date of Correction</i>	<i>Level of Harm</i>
<i>Resident Affect:</i>			
<i>Exits that are free from obstructions and can be used at all times.</i>	<i>01/30/2012</i>	<i>03/10/2012</i>	<i>2 = Minimal harm or potential for actual harm</i>
<i>View Previous Inspections Summary</i>			
<b>Medical Gases and Anesthetizing Areas Deficiencies</b>			
<i>Inspectors determined that the building did not have:</i>	<i>Survey Date</i>	<i>Date of Correction</i>	<i>Level of Harm</i>
<i>Resident Affect:</i>			
<i>proper medical gas storage and administration areas.</i>	<i>01/30/2012</i>	<i>02/17/2012</i>	<i>2 = Minimal harm or potential for actual harm</i>
<i>How to Read a Deficiency Chart</i>			
<b>Complaints and Incidents</b>			
<i>The Nursing Home failed to:</i>	<i>Survey Date</i>	<i>Date of Correction</i>	<i>Level of Harm</i>
<i>Resident Affect:</i>			
<i>Let the resident refuse treatment or refuse to take part in an</i>	<i>01/05/2010</i>	<i>02/01/2010</i>	<i>2 = Minimal harm or potential for actual harm</i>
<i>View Previous Inspections Summary</i>			

*experiment and formulate advance directives.*

<i>Properly hold, secure and manage each resident's personal money which is deposited with the nursing home.</i>	01/31/2012	03/09/2012	<i>2 = Minimal harm or potential for actual harm</i>	Few
<i>Follow policies and procedures to convey the resident's personal funds to the appropriate party responsible after the resident's death.</i>	08/30/2012	10/31/2012	<i>1 = Potential for minimal harm</i>	Some
<i>Provide housekeeping and maintenance services.</i>	10/11/2012	11/10/2012	<i>1 = Potential for minimal harm</i>	Many
<i>Provide adequate and comfortable lighting levels in all areas.</i>	10/11/2012	11/10/2012	<i>1 = Potential for minimal harm</i>	Many
<i>Provide necessary care and services to maintain the highest well being of each resident.</i>	01/20/2012	03/03/2012	<i>2 = Minimal harm or potential for actual harm</i>	Few
<i>Assist those residents who need total help with eating/drinking, grooming and personal and oral hygiene.</i>	07/23/2012	08/16/2012	<i>2 = Minimal harm or potential for actual harm</i>	Few
<i>1) Make sure that each resident's drug regimen is free from unnecessary drugs; 2) Each resident's entire drug/medication is managed and monitored to achieve highest well being.</i>	07/23/2012	08/16/2012	<i>2 = Minimal harm or potential for actual harm</i>	Few

<i>Store, cook, and serve food in a safe and clean way.</i>	10/1/2012	11/10/2012	1 = Potential for minimal harm Many
<i>Maintain drug records and properly mark/label drugs and other similar products according to accepted professional standards.</i>	07/23/2012	08/16/2012	2 = Minimal harm or potential for actual harm Few
<i>Be designed, built, equipped, or well kept to protect the health and safety of residents, workers, and the public.</i>	10/1/2012	11/10/2012	1 = Potential for minimal harm Many
<i>Have enough outside ventilation via a window or mechanical ventilation, or both.</i>	10/1/2012	11/10/2012	1 = Potential for minimal harm Many
<i>Make sure there is a pest control program to prevent/deal with mice, insects, or other pests.</i>	10/1/2012	11/10/2012	1 = Potential for minimal harm Many
<i>Keep accurate, complete and organized clinical records on each resident that meet professional standards.</i>	01/20/2012	03/03/2012	2 = Minimal harm or potential for actual harm Few

*Staffing***AURORA SENIOR LIVING OF MANOKIN, LLC**

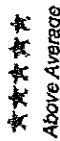
1194 EDGEHILL TERRACE  
PRINCESS ANNE, MD 21853  
(410) 651-0011

**Nursing Home Information**

- 135 Certified Beds
- Participates in [?]: Medicare and Medicaid

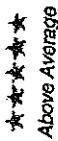
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**Overall Rating [?]**



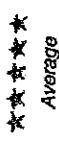
Above Average

**Staffing Rating [?]**



Above Average

**RN Staffing 5 [?]**



Average

**AURORA SENIOR LIVING  
OF MANOKIN, LLC**      **MARYLAND AVERAGE**      **NATIONAL AVERAGE**

**Total Number of Residents**

**113**

**Total Number of Licensed Nurse Staff Hours per Resident per day**

**1 hour  
17 minutes**

**RN Hours per Resident per Day**

**36 minutes**

**41 minutes**

**54 minutes**

**60 minutes**

**75 minutes**

**80 minutes**

*How to Read Staffing Chart / About Staff Roles*

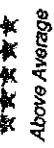
**Quality Measures**

AURORA SENIOR LIVING OF MANOKIN, LLC

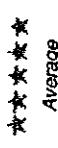
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[Overall Rating \[?\]](#)

[Quality Measure \[?\]](#)



Above Average



Average

Penalties

AURORA SENIOR LIVING OF  
MANOKIN, LLC

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[Overall Rating \[?\]](#)

[Fines \[?\]](#)      [DATE](#)



Above Average

[AMOUNT](#)

This nursing home has not received any fines in the last 3 years.

[Payment Denials \[?\]](#)

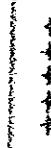
[DATE](#)

Nursing Home Information

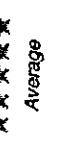
- 135 Certified Beds
- Participates in [?]: Medicare and Medicaid

[Overall Rating \[?\]](#)

[Quality Measure \[?\]](#)



Above Average

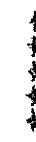


Average

Penalties

AURORA SENIOR LIVING OF  
MANOKIN, LLC

11974 EDGEHILL TERRACE  
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Above Average

[AMOUNT](#)

This nursing home has not received any fines in the last 3 years.

[Payment Denials \[?\]](#)

[DATE](#)

*This nursing home has not received any payment denials in the last 3 years.*

[Back to Top](#) 

*Data Last Updated: February 21, 2013*

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## Nursing Home Profile

### General Information

AURORA SENIOR LIVING OF BUCK HILL,  
LLC

2817 N MAIN ST  
WATERBURY, CT 06704  
(203) 757-0731

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### Nursing Home Information

- 90 Certified Beds
- Participates in [?]: Medicare and Medicaid
- Ownership [?]: For profit - Corporation
- Not in a Hospital
- Has a Resident and Family Council

### Star Ratings Summary

#### Overall Rating [?]

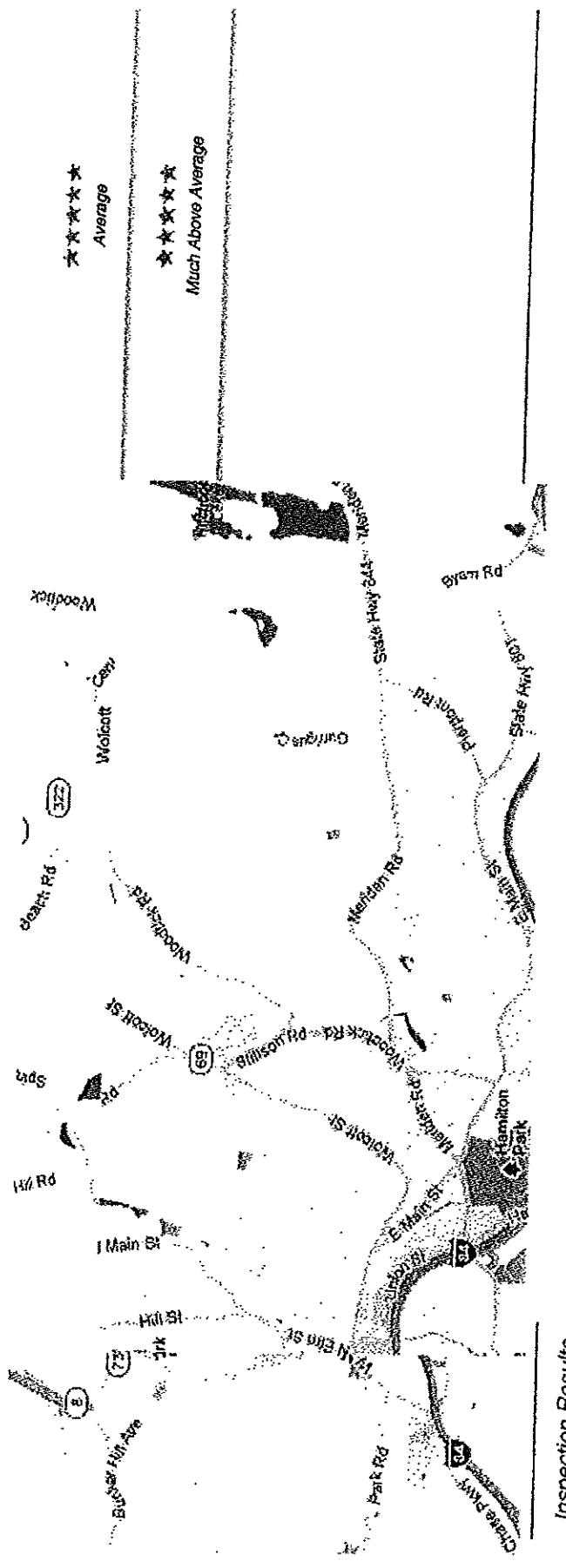
 5 stars

#### Health Inspection Rating [?]

 4 stars

★★★★★  
Above Average

★★★★★  
Average



*Inspection Results*

**AURORA SENIOR LIVING OF BUCK HILL, LLC**

2817 N MAIN ST  
WATERBURY, CT 06704  
(203) 757-0731

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**Overall Rating [?]**

**Health Inspections [?]**

*Date of last standard health inspection:*

**Nursing Home Information**

- 90 Certified Beds
- Participates in [?]: Medicare and Medicaid



*Date(s) of complaint survey(s) within the past 15 months:*

*Total number of Health Deficiencies:*

*Average number of Health Deficiencies in Connecticut:*

*Average number of Health Deficiencies in the United States:*

[View Previous Inspections Summary](#)

[How to Read a Deficiency Chart](#)

#### **Fire Safety Deficiencies**

*Automatic Sprinkler Systems in All Required Areas:*

*Total number of Fire Safety Deficiencies for this nursing home:*

*Average number of Fire Safety Deficiencies in Connecticut:*

*Average number of Fire Safety Deficiencies in the United States:*

*Range of Fire Safety Deficiencies in Connecticut:*

[How to Read a Deficiency Chart](#)

*Staffing*

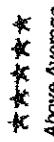
#### **AURORA SENIOR LIVING OF BUCK HILL, LLC**

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WATERBURY, CT 06704  
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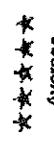
#### **Nursing Home Information**

- 90 Certified Beds
- Participates in [?]: Medicare and Medicaid

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**Overall Rating [?]**

Above Average

**Staffing Rating [?]**

Average

**RN Staffing<sup>5</sup> [?]**

Average

**AURORA SENIOR LIVING  
OF BUCK HILL, LLC****CONNECTICUT AVERAGE****NATIONAL AVERAGE****Total Number of Residents**

87

108.2

38.2

**Total Number of Licensed Nurse Staff Hours per Resident per day**1 hour  
27 minutes1 hour  
36 minutes

44 minutes

47 minutes

43 minutes

50 minutes

2 hours  
7 minutes2 hours  
25 minutes

3 minutes

27 minutes  
7 minutes**RN Hours per Resident per Day****LPN/LVN Hours per Resident per Day****CNA Hours per Resident per Day****Physical Therapy Staff Hours per Resident per Day**

*How to Read Staffing Chart / About Staff Roles*

**Quality Measures**

**AURORA SENIOR LIVING OF BUCK HILL, LLC**

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**Overall Rating [?]***Above Average***Quality Measure [?]***Much Above Average***AURORA SENIOR LIVING OF BUCK HILL, LLC****CONNECTICUT AVERAGE****NATIONAL AVERAGE**

**Short-Stay Residents**  
Current data collection period

**Percent of short-stay residents who self-report moderate to severe pain.**  
*Lower percentages are better.*

**16.1%****21.3%****21.9%**

**Percent of short-stay residents with Pressure Ulcers that are new or worsened.**  
*Lower percentages are better.*

**0.0%****1.3%****1.6%**

**Percent of short-stay residents assessed and given, appropriately, the seasonal influenza vaccines.**  
*Higher percentages are better.*

**87.3%****82.6%****83.3%****Nursing Home Information**

- 90 Certified Beds
- Participates in [?] Medicare and Medicaid

	AURORA SENIOR LIVING OF BUCK HILL, LLC	CONNECTICUT AVERAGE	NATIONAL AVERAGE
Percent of short-stay residents assessed and given, appropriately, the pneumococcal vaccine.	98.3%	81.2%	82.2%
<i>Higher percentages are better.</i>			
Percent of short-stay residents who newly received an antipsychotic medication.	3.6%	2.5%	2.9%
<i>Lower percentages are better.</i>			
<b>Long-Stay Resident Current data collection period</b>			
Percent of long-stay residents experiencing one or more falls with major injury.	4.1%	3.1%	3.3%
<i>Lower percentages are better.</i>			
Percent of long-stay residents with a urinary tract infection.	2.9%	5.5%	7.4%
<i>Lower percentages are better.</i>			
Percent of long-stay residents who self-report moderate to severe pain.	3.0%	8.0%	11.0%
<i>Lower percentages are better.</i>			
Percent of long-stay high-risk residents with pressure ulcers.	6.7%	4.9%	6.6%
<i>Lower percentages are better.</i>			
Percent of long-stay low-risk residents who lose control of their bowels or bladder.	35.6%	40.9%	42.7%
<i>Lower percentages are better.</i>			

AURORA SENIOR LIVING OF BUCK HILL, LLC	CONNECTICUT AVERAGE	NATIONAL AVERAGE
Percent of long-stay residents who have/had a catheter inserted and left in their bladder. <i>Lower percentages are better.</i>	7.2%	2.8% 4.0%
Percent of long-stay residents who were physically restrained. <i>Lower percentages are better.</i>	0.9%	1.4% 2.0%
Percent of long-stay residents whose need for help with daily activities has increased. <i>Lower percentages are better.</i>	10.9%	17.5% 16.0%
Percent of long-stay residents who lose too much weight. <i>Lower percentages are better.</i>	4.3%	6.8% 7.3%
Percent of long-stay residents who have depressive symptoms. <i>Lower percentages are better.</i>	0.5%	4.8% 7.2%
Percent of long-stay residents assessed and given, appropriately, the seasonal influenza vaccine. <i>Higher percentages are better.</i>	94.9%	93.4% 94.0%
Percent of long-stay residents assessed and given, appropriately, the pneumococcal vaccine. <i>Higher percentages are better.</i>	99.5%	94.6% 94.4%
Percent of long-stay residents who received an antipsychotic	15.8%	25.3% 23.4%

AURORA SENIOR LIVING OF BUCK  
HILL, LLC

medication.  
*Lower percentages are better.*

Penalties

AURORA SENIOR LIVING OF BUCK  
HILL, LLC

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(203) 757-0731

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Nursing Home Information

- 90 Certified Beds
- Participates in [?] Medicare and Medicaid

Overall Rating [?]

★★★

Above Average

Fines [?]

DATE

AMOUNT

This nursing home has not received any fines in the last 3 years.

Payment Denials [?]

DATE

This nursing home has not received any payment denials in the last 3 years.

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Data Last Updated: February 21, 2013

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## Nursing Home Profile

### General Information

#### AURORA SENIOR LIVING OF DERRY, LLC

#### Nursing Home Information

20 CHESTER ROAD  
DERRY, NH 03038  
(603) 432-3801

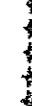
Add to my Favorites  [Map and Directions !\[\]\(6302ab47746f592cf6682b1571042cb5\_img.jpg\)](#)

- 62 Certified Beds
- Participates in [?]: Medicare and Medicaid
- Ownership [?]: For profit - Corporation
- Not in a Hospital
- Resident Council Only

### Star Ratings Summary



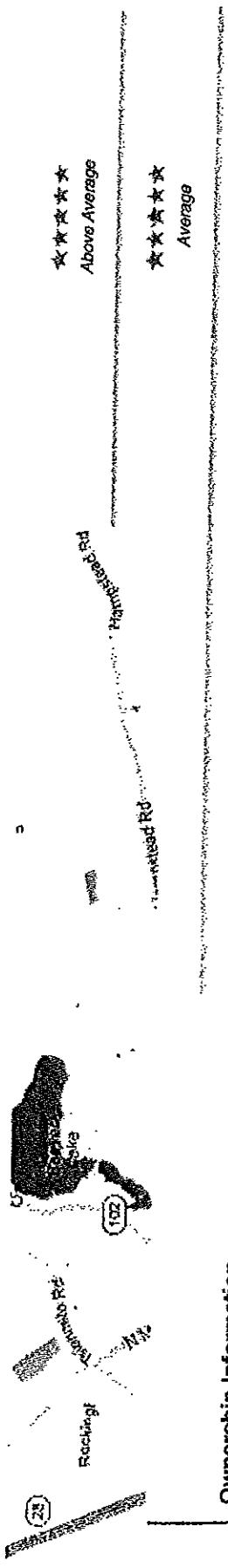
### Overall Rating [?]

 Above Average

### Health Inspection Rating [?]

 Average

- Not in a Continuing Care Retirement Community (CCRC) [?]
- Not in a Hospital
- Resident Council Only



#### Ownership Information

Ownership [[?\]](#): For profit - Corporation  
Legal Business Name: AURORA SENIOR LIVING OF DERRY, LLC

[Get More Ownership Information](#)

#### Inspection Results

#### AURORA SENIOR LIVING OF DERRY, LLC

20 CHESTER ROAD  
DERRY, NH 03038  
(603) 432-3801

[Add to my Favorites](#) [Map and Directions](#)

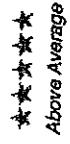
#### Overall Rating [[?\]](#)

#### Health Inspections [[?\]](#)

Date of last standard health inspection:  
02/02/2012 [View Full Report](#)

#### Nursing Home Information

- 62 Certified Beds
- Participates in [[?\]](#): Medicare and Medicaid



Date(s) of complaint survey(s) within the past 15 months:

Total number of Health Deficiencies:

Average number of Health Deficiencies in New Hampshire:

Average number of Health Deficiencies in the United States:

#### No Complaint Surveys

2

3.8

7.4

[View Previous Inspections Summary](#)

#### Nutrition and Dietary Deficiencies

Inspectors determined that the nursing home failed to:

Stores, cook, and serve food in a safe and clean way.

Survey Date

Date of Correction

[View Previous Inspections Summary](#)

2 = Minimal harm or potential for actual harm

Few

#### Environmental Deficiencies

Inspectors determined that the nursing home failed to:

Provide housekeeping and maintenance services.

Survey Date

Date of Correction

[View Previous Inspections Summary](#)

Resident  
Affecte

2 = Minimal harm or potential for actual harm

Few

#### Fire Safety Deficiencies

Automatic Sprinkler Systems in All Required Areas:

Total number of Fire Safety Deficiencies for this nursing home:

[View Previous Inspections Summary](#)

1

*Average number of Fire Safety Deficiencies in New Hampshire:*

1.2

*Average number of Fire Safety Deficiencies in the United States:*

3.5

*Range of Fire Safety Deficiencies in New Hampshire:*

0-6

### Building Construction Deficiencies

*Inspectors determined that the building did not have:*

*a two-hour-resistant firewall in common walls.*

[View Previous Inspections Summary](#)

Date of Correction	Survey Date	Resider Affect
06/01/2012	02/02/2012	2 = Minimal harm or potential for actual harm

*2 = Minimal harm or potential for actual harm*

*How to Read a Deficiency Chart*

### Complaints and Incidents

Date of Correction	Survey Date	Resider Affect
05/09/2010	03/25/2010	2 = Minimal harm or potential for actual harm

*Make sure services provided by the nursing facility meet professional standards of quality.*

Date of Correction	Survey Date	Resider Affect
05/09/2010	03/25/2010	2 = Minimal harm or potential for actual harm

*Provide care by qualified persons according to each resident's written plan of care.*

Date of Correction	Survey Date	Resider Affect
05/09/2010	03/25/2010	2 = Minimal harm or potential for actual harm

*Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.*

*Keep accurate, complete and organized clinical records on each resident that meet professional standards.*

03/25/2010

05/09/2010

*2 = Minimal harm or potential for actual harm  
Few standards.*

Staffing

#### AURORA SENIOR LIVING OF DERRY, LLC

20 CHESTER ROAD  
DERRY, NH 03038  
(603) 432-3801

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[Map and Directions](#) 

[Overall Rating](#) [?]



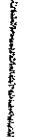
*Above Average*

[Staffing Rating](#) [?]



*Above Average*

[RN Staffing](#)  [?]



*Average*

#### AURORA SENIOR LIVING OF DERRY, LLC

#### NEW HAMPSHIRE AVERAGE

Total Number of Residents	61	91.1	88.2
Total Number of Licensed Nurse Staff Hours per Resident per day	1 hour 11 minutes	1 hour 34 minutes	1 hour 36 minutes
RN Hours per Resident per Day	34 minutes	57 minutes	47 minutes

	AURORA SENIOR LIVING OF DERRY, LLC	NEW HAMPSHIRE AVERAGE	NATIONAL AVERAGE
<i>LPN/VN Hours per Resident per Day</i>	38 minutes	38 minutes	50 minutes
<i>CNA Hours per Resident per Day</i>	2 hours 32 minutes	2 hours 36 minutes	2 hours 27 minutes
<i>Physical Therapy Staff Hours per Resident per Day</i>	8 minutes	6 minutes	6 minutes
<i>How to Read Staffing Chart / About Staff Roles</i>			
<hr/>			
<b>Quality Measures</b>			

AURORA SENIOR LIVING OF DERRY, LLC	Nursing Home Information
20 CHESTER ROAD DERRY, NH 03038 (603) 432-3801	<ul style="list-style-type: none"> <li>• 62 Certified Beds</li> <li>• Participates in [?]: Medicare and Medicaid</li> </ul>
<a href="#">Add to my Favorites</a>	
<a href="#">Map and Directions</a>	
<b>Overall Rating [?]</b>	Above Average
<b>Quality Measure [?]</b>	Average
<hr/>	
<b>Penalties</b>	
<hr/>	
AURORA SENIOR LIVING OF DERRY, LLC	Nursing Home Information

20 CHESTER ROAD  
DERRY, NH 03038  
(603) 432-3801  
[Add to my Favorites](#) •  
[Map and Directions](#)

- 62 Certified Beds
- Participates in 171 Medicare and Medicaid

[Overall Rating \[?\]](#)

★★★  
Above Average

[Fines \[?\]](#)

FINES	DATE	AMOUNT

This nursing home has not received any fines in the last 3 years.

[Payment Denials \[?\]](#)

PAYMENT DENIALS	DATE

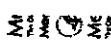
This nursing home has not received any payment denials in the last 3 years.

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Data Last Updated: February 21, 2013

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7500 Security Boulevard, Baltimore, MD 21244



# Medicare.gov

The Official U.S. Government Site for Medicare

# Medicare.gov

The Official U.S. Government Site for Medicare

## Nursing Home Profile

### General Information

#### AURORA SENIOR LIVING OF NEW BRITAIN, LLC

400 BRITTANY FARMS RD  
NEW BRITAIN, CT 06053  
(860) 224-3111

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[Map and Directions](#) 

### Nursing Home Information

- 282 Certified Beds
- Participates in [?]: Medicare and Medicaid
- Ownership [?]: Non profit - Corporation
- Not in a Hospital
- Has a Resident and Family Council

### Star Ratings Summary

#### Overall Rating [?]

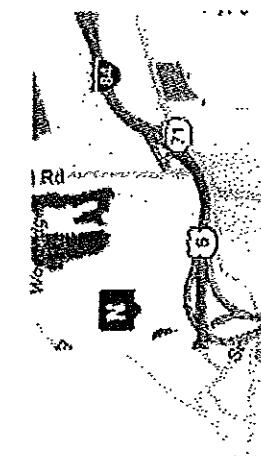


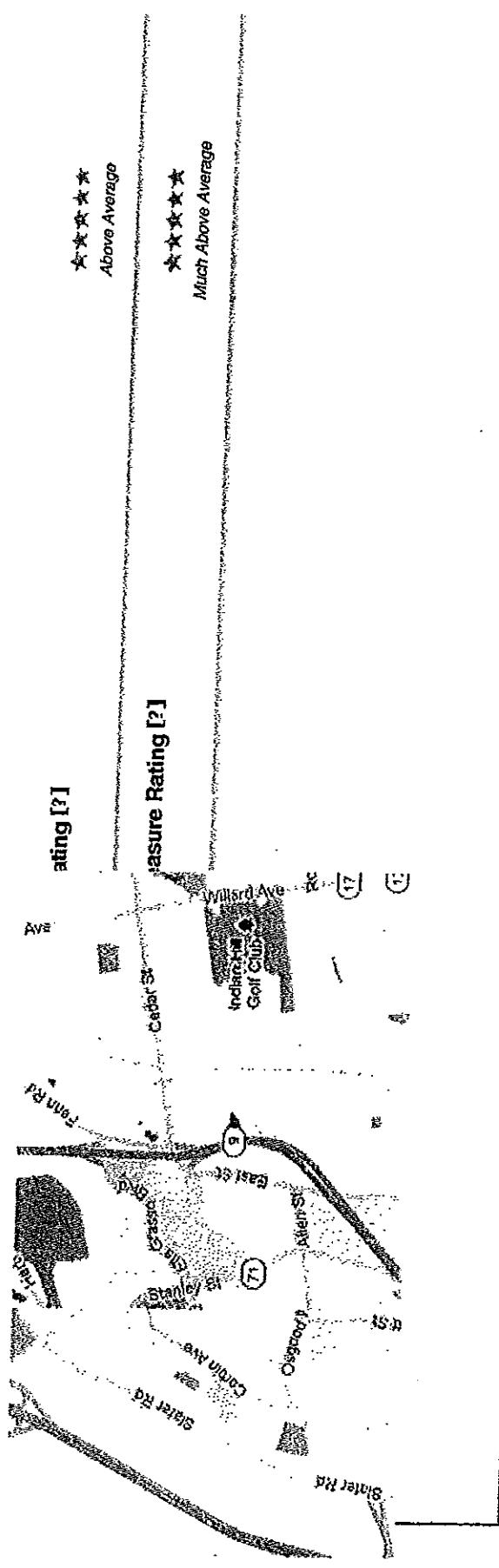
Above Average

#### Health Inspection Rating [?]



Below Average





*Inspection Results*

AURORA SENIOR LIVING OF NEW BRITAIN, LLC

400 BRITTANY FARMS RD  
NEW BRITAIN, CT 06053  
(860) 224-3111

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Overall Rating [?]

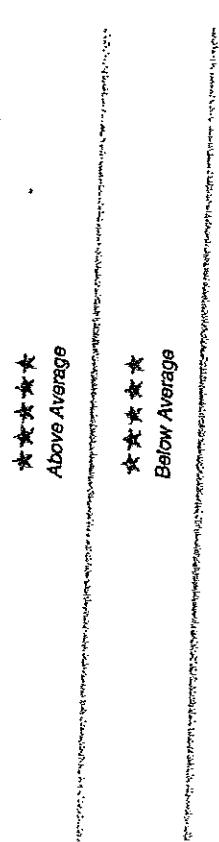
Above Average

Health Inspections [?]

Date of last standard health inspection:  
*[Redacted]*

Nursing Home Information

- 282 Certified Beds
- Participates in [?]: Medicare and Medicaid



Date(s) of complaint survey(s) within the past 15 months:

Total number of Health Deficiencies:

Average number of Health Deficiencies in Connecticut:

Average number of Health Deficiencies in the United States:

[View Previous Inspections Summary](#)

[How to Read a Deficiency Chart](#)

#### Fire Safety Deficiencies

Automatic Sprinkler Systems in All Required Areas:

Total number of Fire Safety Deficiencies for this nursing home:

Average number of Fire Safety Deficiencies in Connecticut:

Average number of Fire Safety Deficiencies in the United States:

Range of Fire Safety Deficiencies in Connecticut:

[How to Read a Deficiency Chart](#)

Staffing

#### AURORA SENIOR LIVING OF NEW BRITAIN, LLC

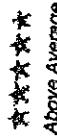
400 BRITTANY FARMS RD  
NEW BRITAIN, CT 06053  
(860) 224-3111

#### Nursing Home Information

- 282 Certified Beds
- Participates in [?], Medicare and Medicaid

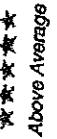
[Add to my Favorites](#) [Map and Directions](#)

[Overall Rating \[?\]](#)



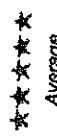
Above Average

[Staffing Rating \[?\]](#)



Above Average

[RN Staffing 5 \[?\]](#)



Average

[How to Read Staffing Chart](#) | [About Staff Roles](#)

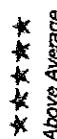
[Quality Measures](#)

#### AURORA SENIOR LIVING OF NEW BRITAIN, LLC

400 BRITTANY FARMS RD  
NEW BRITAIN, CT 06053  
(860) 224-3111

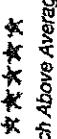
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[Overall Rating \[?\]](#)



Above Average

[Quality Measure \[?\]](#)



Much Above Average

#### Nursing Home Information

- 282 Certified Beds
- Participates in [?]: Medicare and Medicaid

	AURORA SENIOR LIVING OF NEW BRITAIN, LLC	CONNECTICUT AVERAGE	NATIONAL AVERAGE
<b>Short-Stay Residents</b> Current data collection period			
<i>Percent of short-stay residents who self-report moderate to severe pain.</i>	<b>27.7%</b>	<b>21.3%</b>	<b>21.9%</b>
<i>Lower percentages are better.</i>			
<i>Percent of short-stay residents with Pressure ulcers that are new or worsened.</i>	<b>0.0%</b>	<b>1.3%</b>	<b>1.6%</b>
<i>Lower percentages are better.</i>			
<i>Percent of short-stay residents assessed and given, appropriately, the seasonal influenza vaccine.</i>	<b>95.0%</b>	<b>82.6%</b>	<b>83.3%</b>
<i>Higher percentages are better.</i>			
<i>Percent of short-stay residents assessed and given, appropriately, the pneumococcal vaccine.</i>	<b>96.6%</b>	<b>81.2%</b>	<b>82.2%</b>
<i>Higher percentages are better.</i>			
<i>Percent of short-stay residents who newly received an antipsychotic medication.</i>	<b>3.6%</b>	<b>2.5%</b>	<b>2.9%</b>
<i>Lower percentages are better.</i>			
<b>Long-Stay Resident</b> Current data collection period			
<i>Percent of long-stay residents experiencing one or more falls</i>	<b>1.5%</b>	<b>3.1%</b>	<b>3.3%</b>

AURORA SENIOR LIVING OF NEW BRITAIN, LLC	CONNECTICUT AVERAGE	NATIONAL AVERAGE
<i>with major injury. Lower percentages are better.</i>		
Percent of long-stay residents with a urinary tract infection. <i>Lower percentages are better.</i>	3.0% 5.5%	7.4%
Percent of long-stay residents who self-report moderate to severe pain. <i>Lower percentages are better.</i>	4.8% 8.0%	11.0%
Percent of long-stay high-risk residents with pressure ulcers. <i>Lower percentages are better.</i>	4.0% 4.9%	6.6%
Percent of long-stay low-risk residents who lose control of their bowels or bladder. <i>Lower percentages are better.</i>	50.6% 40.9%	42.7%
Percent of long-stay residents who have/had a catheter inserted and left in their bladder. <i>Lower percentages are better.</i>	2.2% 2.8%	4.0%
Percent of long-stay residents who were physically restrained. <i>Lower percentages are better.</i>	1.5% 1.4%	2.0%
Percent of long-stay residents whose need for help with daily activities has increased. <i>Lower percentages are better.</i>	18.7% 17.5%	16.0%
Percent of long-stay residents who lose too much weight. <i>Lower percentages are better.</i>	8.2% 6.8%	7.3%

AURORA SENIOR LIVING OF NEW BRITAIN, LLC	CONNECTICUT AVERAGE	NATIONAL AVERAGE
Percent of long-stay residents who have depressive symptoms. <i>Lower percentages are better.</i>	8.7%	4.8%
Percent of long-stay residents assessed and given, appropriately, the seasonal influenza vaccine. <i>Higher percentages are better.</i>	99.9%	93.4%
Percent of long-stay residents assessed and given, appropriately, the pneumococcal vaccine. <i>Higher percentages are better.</i>	99.7%	94.6%
Percent of long-stay residents who received an antipsychotic medication. <i>Lower percentages are better.</i>	24.0%	25.3%

**Penalties****AURORA SENIOR LIVING OF NEW BRITAIN, LLC**

400 BRITTANY FARMS RD  
NEW BRITAIN, CT 06053  
(860) 224-3111

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[Map and Directions](#) 

**Overall Rating [?]**

★★★  
Above Average

**Nursing Home Information**

- 282 Certified Beds
- Participates in [?]: Medicare and Medicaid

Fines [?]	DATE	AMOUNT
<i>This nursing home has not received any fines in the last 3 years.</i>		
Payment Denials [?]	DATE	
<i>This nursing home has not received any payment denials in the last 3 years.</i>		

[Back to Top ↑](#)

*Data Last Updated: February 21, 2013*

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Medicare  
Me

47

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The Official U.S. Government Site for Medicare

## Nursing Home Profile

### General Information

#### AURORA SENIOR LIVING OF NORWALK

34 MIDROCKS DRIVE  
NORWALK, CT 06851  
(203) 847-9686

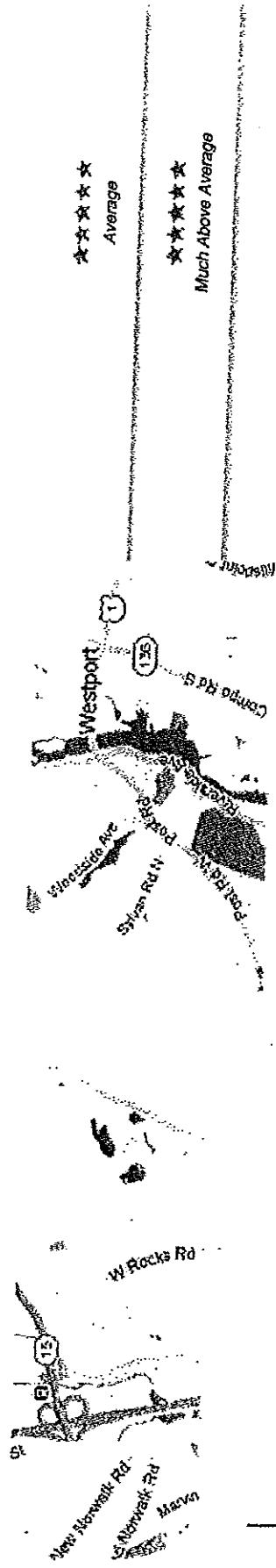
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#### Nursing Home Information

- 150 Certified Beds
- Participates in [?]: Medicare and Medicaid
- Ownership [?]: For profit - Corporation
- Not in a Hospital
- Resident Council Only
- Not in a Continuing Care Retirement Community (CCRC) [?]

#### Star Ratings Summary





[Owner Profile \[?\]](#)

[Business Profile \[?\]](#)

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#### Inspection Results

#### AURORA SENIOR LIVING OF NORWALK

34 MIDROCKS DRIVE  
NORWALK, CT 06851  
(203) 847-9686

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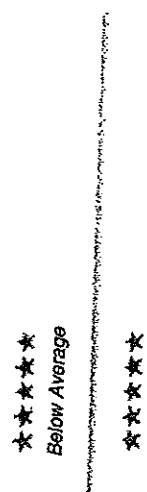
[Overall Rating](#) [?]

[Health Inspections](#) [?]

*Date of last standard health inspection:*  
07/30/2012 [View Full Report](#)

#### Nursing Home Information

- 150 Certified Beds
- Participates in [?] Medicare and Medicaid



*Date(s) of complaint survey(s) within the past 15 months:*

*Total number of Health Deficiencies:*

*Average number of Health Deficiencies in Connecticut:*

*Average number of Health Deficiencies in the United States:*

07/30/2012

[View Full Report](#)

21

8.8

7.4

[View Previous Inspections Summary](#)

#### Quality Care Deficiencies

*Inspectors determined that the nursing home failed to:*

*Make sure services provided by the nursing facility meet professional standards of quality.*

07/30/2012

*Date of Correction*  
2 = Minimal harm or potential for actual harm

*Provide care by qualified persons according to each resident's written plan of care.*

08/17/2012

*Date of Correction*  
2 = Minimal harm or potential for actual harm

*Provide necessary care and services to maintain the highest well being of each resident.*

07/30/2012

*Date of Correction*  
4 = Immediate jeopardy to resident health or safety

*Assist those residents who need total help with eating/drinking, grooming and personal and oral hygiene.*

08/17/2012

*Date of Correction*  
2 = Minimal harm or potential for actual harm

[View Previous Inspections Summary](#)

<i>Survey Date</i>	<i>Date of Correction</i>	<i>Level of Harm</i>	<i>Resident Affect</i>

*Date of Correction*  
2 = Minimal harm or potential for actual harm

*Date of Correction*  
2 = Minimal harm or potential for actual harm

*Date of Correction*  
4 = Immediate jeopardy to resident health or safety

*Date of Correction*  
2 = Minimal harm or potential for actual harm

Give residents proper treatment to prevent new bed (pressure) sores or heal existing bed sores.	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm	Few
Make sure that each resident who enters the nursing home without a catheter is not given a catheter, and receive proper services to prevent urinary tract infections and restore normal bladder function.	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm	Few
Make sure that each resident gets a nutritional and well balanced diet, unless it is not possible to do so.	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm	Few
Have enough nurses to care for every resident in a way that maximizes the resident's well being.	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm	Some
Give or get specialized rehabilitative services per the patient's assessment or plan of care.	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm	Few
Resident Assessment Deficiencies	Survey Date	Date of Correction	Level of Harm	Resident Affect
Inspectors determined that the nursing home failed to:	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm	Few
Develop a complete care plan that meets all of a resident's needs, with timetables and actions that can be measured.				

[View Previous Inspections Summary](#)

<b>Resident Rights Deficiencies</b>			
Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm Resident Affects
<i>Allow the resident the right to participate in the planning or revision of the resident's care plan.</i>	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm Few
<i>Resident Rights Deficiencies</i>			<a href="#">View Previous Inspections Summary</a>
<i>Inspectors determined that the nursing home failed to:</i>			
<i>Tell the resident completely about his or her health status, care and treatments.</i>	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm Few
<i>Immediately tell the resident, the resident's doctor and a family member of the resident of situations (injury/decline/room, etc.) that affect the resident.</i>	07/30/2012	08/17/2012	3 = Actual harm Few
<i>Provide care for residents in a way that keeps or builds each resident's dignity and respect of individuality.</i>	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm Few
<i>Make sure each resident has the right to have a choice over activities, their schedules and Health care according to his or her interests, assessment, and plan of care.</i>	07/30/2012	08/17/2012	2 = Minimal harm or potential for actual harm Few
<b>Nutrition and Dietary Deficiencies</b>			
Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm Resident Affects

*Prepare food that is nutritional, appetizing, tasty, attractive, well-cooked, and at the right temperature.*

07/30/2012

08/17/2012

*2 = Minimal harm or potential for actual harm*

### Environmental Deficiencies

**Inspectors determined that the nursing home failed to:**

*Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.*

07/30/2012

08/17/2012

*3 = Actual harm*

*Few*

*Have a program that investigates, controls and keeps infection from spreading.*

07/30/2012

08/17/2012

*2 = Minimal harm or potential for actual harm*

*Some*

### Administration Deficiencies

**Inspectors determined that the nursing home failed to:**

*Operate and provide services according to Federal, State, and local laws and professional standards.*

07/30/2012

08/17/2012

*2 = Minimal harm or potential for actual harm*

*Few*

*Choose a doctor to serve as the medical director to create resident care policies and coordinate medical care in the facility.*

07/30/2012

08/17/2012

*2 = Minimal harm or potential for actual harm*

*Some*

[View Previous Inspections Summary](#)

Survey Date	Date of Correction	Level of Harm	Resident Affect
-------------	--------------------	---------------	-----------------

[View Previous Inspections Summary](#)

Survey Date	Date of Correction	Level of Harm	Resident Affect
-------------	--------------------	---------------	-----------------

[View Previous Inspections Summary](#)

Survey Date	Date of Correction	Level of Harm	Resident Affect
-------------	--------------------	---------------	-----------------

[View Previous Inspections Summary](#)

Survey Date	Date of Correction	Level of Harm	Resident Affect
-------------	--------------------	---------------	-----------------

**Set up an ongoing quality assessment and assurance group to review quality deficiencies quarterly, and develop corrective plans of action.**

07/30/2012

08/17/2012

*2 = Minimal harm or potential for actual harm*

## **Fire Safety Deficiencies**

## *Automatic Sprinkler Systems in All Required Areas:*

*Total number of Fire Safety Deficiencies for this nursing home:*

## Average number of Fire Safety Deficiencies in Connecticut:

### *Average number of Fire Safety Deficiencies in the United States:*

Range of Fire Safety Deficiencies in Connecticut

Miscellaneous Definitions

**Inspectors determined that the building did not have:**

*other fire safety features required by fire safety codes*

08/31/2012

卷之三

[View Previous Inspections Summary](#)

**Resider Affect**

## **How to Read a Deficiency Chart**

The Nursing Home failed to:  
Survey Date:

Data of Correlation

卷之三

Resident  
Ass.

<http://www.medicare.gov/NursingHomeCompare/profile.aspx>

<i>Tell the resident completely about his or her health status, care and treatments.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>
<i>Immediately tell the resident, the resident's doctor and a family member of the resident of situations (injury/decline/room, etc.) that affect the resident.</i>	07/30/2012	08/17/2012	<i>3 = Actual harm</i>	<i>Few</i>
<i>Protect each resident from all abuse, physical punishment, and being separated from others.</i>	04/19/2010	05/21/2010	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>
<i>Make sure each resident has the right to have a choice over activities, their schedules and health care according to his or her interests, assessment, and plan of care.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>
<i>Make sure services provided by the nursing facility meet professional standards of quality.</i>	12/10/2009	01/15/2010	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>
<i>Make sure services provided by the nursing facility meet professional standards of quality.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>
<i>Provide necessary care and services to maintain the highest well being of each resident.</i>	12/10/2009	01/15/2010	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>

<i>Provide necessary care and services to maintain the highest well being of each resident .</i>	07/30/2012	07/30/2012	<i>4 = Immediate jeopardy to resident health or safety</i>	<i>Few</i>
<i>Assist those residents who need total help with eating/drinking, grooming and personal and oral hygiene.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>
<i>Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.</i>	05/19/2011	06/24/2011	<i>3 = Actual harm</i>	<i>Few</i>
<i>Make sure that each resident gets a nutritional and well balanced diet, unless it is not possible to do so.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>
<i>Have enough nurses to care for every resident in a way that maximizes the resident's well being.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Some</i>
<i>Have a program that investigates, controls and keeps infection from spreading.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Some</i>
<i>Operate and provide services according to Federal, State, and local laws and professional standards.</i>	07/30/2012	08/17/2012	<i>2 = Minimal harm or potential for actual harm</i>	<i>Few</i>

Staffing

**AURORA SENIOR LIVING OF NORWALK**

**Nursing Home Information**

Quality Measures

AURORA SENIOR LIVING OF NORWALK

34 MIDROCKS DRIVE  
NORWALK, CT 06851  
(203) 847-9686

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Map and Directions 

Overall Rating [?]



Below Average

Quality Measure [?]



Much Above Average

Penalties

AURORA SENIOR LIVING OF  
NORWALK

34 MIDROCKS DRIVE  
NORWALK, CT 06851  
(203) 847-9686

Add to my Favorites   
Map and Directions 

Overall Rating [?]



Below Average

Fines [?]

DATE

AMOUNT

This nursing home has not received any fines in the last 3 years.

Nursing Home Information

- 150 Certified Beds
- Participates in [?]: Medicare and Medicaid

**Payment Denials [?]**

**DATE**

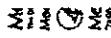
*This nursing home has not received any payment denials in the last 3 years.*

[Back to Top ↑](#)

*Data Last Updated: February 21, 2013*

## Medicare.gov

*A federal government website managed by the Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Baltimore, MD 21244*

 Medicare

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The Official U.S. Government Site for Medicare

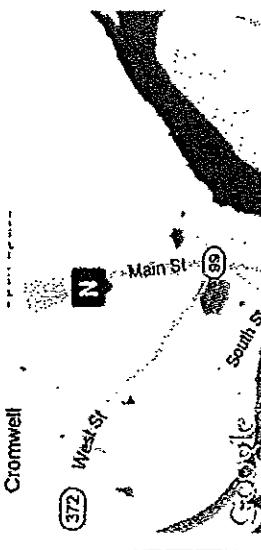
## Nursing Home Profile

### General Information

#### AURORA SENIOR LIVING OF CROMWELL, LLC

385 MAIN ST  
CROMWELL, CT 06416  
(860) 635-5613

Add to my Favorites [Map and Directions](#)



#### Nursing Home Information

- 172 Certified Beds
- Participates in [?]: Medicare and Medicaid
- Ownership [?]: For profit - Corporation
- Not in a Continuing Care Retirement Community (CCRC) [?]
- Not in a Hospital
- Resident Council Only

#### Star Ratings Summary

##### Overall Rating [?]



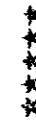
Much Below Average

##### Health Inspection Rating [?]



Much Below Average

##### Staffing Rating [?]



Much Below Average

##### Quality Measure Rating [?]



Average

#### Ownership Information

Ownership [?]: For profit - Corporation

Legal Business Name: AURORA SENIOR LIVING AT CROMWELL

[Get More Ownership Information](#)

## Inspection Results

<b>AURORA SENIOR LIVING OF CROMWELL, LLC</b> 385 MAIN ST CROMWELL, CT 06416 (860) 635-5613 <a href="#">Add to my Favorites</a>  <a href="#">Map and Directions</a> 	<b>Nursing Home Information</b> <ul style="list-style-type: none"><li>172 Certified Beds</li><li>Participates in [?]: Medicare and Medicaid</li></ul> <b>Overall Rating [?]</b> ☆☆☆☆ Much Below Average <b>Health Inspections [?]</b> ☆☆☆☆ Much Below Average <b>Date of last standard health inspection:</b> 06/29/2012 <a href="#">View Full Report</a>
<b>Date(s) of complaint survey(s) within the past 15 months:</b>	06/29/2012 <a href="#">View Full Report</a> 03/13/2012 <a href="#">View Full Report</a> 12/07/2011 <a href="#">View Full Report</a> 09/20/2011 <a href="#">View Full Report</a>
<b>Total number of Health Deficiencies:</b>	19
<b>Average number of Health Deficiencies in Connecticut:</b>	8.8

Average number of Health Deficiencies in the United States:

7.4

[View Previous Inspections Summary](#)

### Mistreatment Deficiencies

Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm	Residents Affected
1) Hire only people with no legal history of abusing, neglecting or mistreating residents; or 2) report and investigate any acts or reports of abuse, neglect or mistreatment of residents.	06/29/2012	08/10/2012	2 = Minimal harm or potential for actual harm	Few

### Quality Care Deficiencies

Inspectors determined that the nursing home failed to:	Survey Date	Date of Correction	Level of Harm	Residents Affected
Make sure services provided by the nursing facility meet professional standards of quality.	12/07/2011	01/18/2012	2 = Minimal harm or potential for actual harm	Few
Provide care by qualified persons according to each resident's written plan of care.	06/29/2012	08/10/2012	2 = Minimal harm or potential for actual harm	Few
Provide necessary care and services to maintain the highest well being of each resident.	03/13/2012	03/26/2012	3 = Actual harm	Few
Assist those residents who need total help with eating/drinking, grooming and personal and oral hygiene.	06/29/2012	08/10/2012	2 = Minimal harm or potential for actual harm	Few

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<a href="#">View Previous Inspections Summary</a>	<b>Resident Assessment Deficiencies</b>	<b>Inspectors determined that the nursing home failed to:</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
		Make sure that each resident gets a nutritional and well balanced diet, unless it is not possible to do so.	12/07/2011	01/18/2012	3 = Actual harm Few
		Give each resident enough fluids to keep them healthy and prevent dehydration.	12/07/2011	01/18/2012	3 = Actual harm Few
	<a href="#">View Previous Inspections Summary</a>	<b>Resident Rights Deficiencies</b>	<b>Inspectors determined that the nursing home failed to:</b>	<b>Date of Correction</b>	<b>Level of Harm</b>
		Develop a complete care plan that meets all of a resident's needs, with timetables and actions that can be measured.	06/29/2012	08/10/2012	2 = Minimal harm or potential for actual harm Few
	<a href="#">View Previous Inspections Summary</a>	<b>Nutrition and Dietary Deficiencies</b>	<b>Inspectors determined that the nursing home failed to:</b>	<b>Date of Correction</b>	<b>Level of Harm</b>
		Provide care for residents in a way that keeps or builds each resident's dignity and respect of individuality.	06/29/2012	08/10/2012	2 = Minimal harm or potential for actual harm Few

Store, cook, and serve food in a safe and clean way.

### Pharmacy Service Deficiencies

**Inspectors determined that the nursing home failed to:**

- 1) Make sure that each resident's drug regimen is free from unnecessary drugs; 2) Each resident's entire drug/medication is managed and monitored to achieve highest well being.

Maintain drug records and properly mark/label drugs and other similar products according to accepted professional standards.

### Environmental Deficiencies

**Inspectors determined that the nursing home failed to:**

Provide housekeeping and maintenance services.

Provide housekeeping and maintenance services.

Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.

06/29/2012                    08/10/2012                    2 = Minimal harm or potential for actual harm                    Some

<b>Survey Date</b>		<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
<a href="#">View Previous Inspections Summary</a>				

1) Make sure that each resident's drug regimen is free from unnecessary drugs; 2) Each resident's entire drug/medication is managed and monitored to achieve highest well being.

06/29/2012                    08/10/2012                    2 = Minimal harm or potential for actual harm                    Some

<b>Survey Date</b>		<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
<a href="#">View Previous Inspections Summary</a>				

06/29/2012                    08/10/2012                    2 = Minimal harm or potential for actual harm                    Some

09/20/2011                    10/31/2011                    2 = Minimal harm or potential for actual harm                    Few

Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.

#### **Administration Deficiencies**

**Inspectors determined that the nursing home failed to:**

Keep accurate, complete and organized clinical records on each resident that meet professional standards.

Keep accurate, complete and organized clinical records on each resident that meet professional standards.

#### **Fire Safety Deficiencies**

**Automatic Sprinkler Systems in All Required Areas:**

Total number of Fire Safety Deficiencies for this nursing home:

Average number of Fire Safety Deficiencies in Connecticut:

Average number of Fire Safety Deficiencies in the United States:

Range of Fire Safety Deficiencies in Connecticut:

#### **Smoke Compartmentation and Control Deficiencies**

<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>

View Previous Inspections Summary

Level of Harm

06/29/2012                    08/10/2012                    3 = Actual harm                    Few

12/07/2011                    01/18/2012                    2 = Minimal harm or potential for actual harm                    Few

09/20/2011                    10/31/2011                    2 = Minimal harm or potential for actual harm                    Few

#### **How to Read a Deficiency Chart**

**View Previous Inspections Summary**

Fully Sprinklered

10

2.0

3.5

0-10

View Previous Inspections Summary

Level of Harm

<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
walls or barriers that prevent smoke from passing through and would resist fire for at least one hour.	06/28/2012	08/24/2012	2 = Minimal harm or potential for actual harm	Many
<a href="#">View Previous Inspections Summary</a>				
<b>Hazardous Area Deficiencies</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
<a href="#">View Previous Inspections Summary</a>				
<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
Construction that can resist fire for one hour or an approved fire extinguishing system.	06/28/2012	08/24/2012	2 = Minimal harm or potential for actual harm	Many
<a href="#">View Previous Inspections Summary</a>				
<b>Exits and Egress Deficiencies</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
<a href="#">View Previous Inspections Summary</a>				
<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
exits that are accessible at all times.	06/28/2012	08/24/2012	2 = Minimal harm or potential for actual harm	Few
<a href="#">View Previous Inspections Summary</a>				
<b>Illumination and Emergency Power Deficiencies</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
<a href="#">View Previous Inspections Summary</a>				
<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
emergency lighting that can last at least 1 1/2 hours.	06/28/2012	08/24/2012	2 = Minimal harm or potential for actual harm	Few
<a href="#">View Previous Inspections Summary</a>				
<b>Fire Alarm Systems Deficiencies</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
<a href="#">View Previous Inspections Summary</a>				
<b>Inspectors determined that the building did not have:</b>				

An approved installation, maintenance and testing program for fire alarm systems.	06/28/2012	08/24/2012	2 = Minimal harm or potential for actual harm	Many
<b>Smoking Regulations Deficiencies</b>				
<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
Posted "No-smoking" signs in areas where smoking is not permitted or did not provide ashtrays where smoking was allowed.				
			<a href="#">View Previous Inspections Summary</a>	
<b>Building Service Equipment Deficiencies</b>				
<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
properly constructed linen or trash chutes.				
			<a href="#">View Previous Inspections Summary</a>	
<b>Furnishings and Decorations Deficiencies</b>				
<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
exits that are free from obstructions and can be used at all times.				
			<a href="#">View Previous Inspections Summary</a>	
<b>Electrical Deficiencies</b>				
<b>Inspectors determined that the building did not have:</b>	<b>Survey Date</b>	<b>Date of Correction</b>	<b>Level of Harm</b>	<b>Residents Affected</b>
06/28/2012 08/24/2012 2 = Minimal harm or potential for actual harm Few				

Properly installed electrical wiring and equipment.

#### Miscellaneous Deficiencies

**Inspectors determined that the building did not have:**

Other fire safety features required by fire safety codes.

2 = Minimal harm or potential for actual harm

[View Previous Inspections Summary](#)

Survey Date	Date of Correction	Level of Harm Residents Affected
05/28/2012	08/24/2012	2 = Minimal harm or potential for actual harm Many
<b>How to Read a Deficiency Chart</b>		
Survey Date	Date of Correction	Level of Harm Residents Affected
12/21/2010	01/31/2011	3 = Actual harm Few
Immediately tell the resident, the resident's doctor and a family member of the resident of situations (injury/decline/room, etc.) that affect the resident.	04/20/2010	2 = Minimal harm or potential for actual harm Few
Immediately tell the resident, the resident's doctor and a family member of the resident of situations (injury/decline/room, etc.) that affect the resident.	04/20/2010	2 = Minimal harm or potential for actual harm Few
Determine if it is safe for the resident to self-administer drugs.	04/20/2010	2 = Minimal harm or potential for actual harm Few
1) Hire only people with no legal history of abusing, neglecting or mistreating residents; or 2) report and	08/10/2012	2 = Minimal harm or potential for actual harm Few

Investigate any acts or reports of abuse, neglect or mistreatment of residents.				
Provide housekeeping and maintenance services.	12/07/2011	01/18/2012	2 = Minimal harm or potential for actual harm	Few
Conduct initial and periodic assessments of each resident's functional capacity.	03/09/2010	04/20/2010	2 = Minimal harm or potential for actual harm	Some
Make sure each resident receives an accurate assessment by a qualified health professional.	12/07/2011	01/18/2012	2 = Minimal harm or potential for actual harm	Few
Develop a complete care plan that meets all of a resident's needs, with timetables and actions that can be measured.	06/29/2012	08/10/2012	2 = Minimal harm or potential for actual harm	Few
Develop a complete care plan that meets all of a resident's needs, with timetables and actions that can be measured.	03/09/2010	04/20/2010	2 = Minimal harm or potential for actual harm	Few
Make sure services provided by the nursing facility meet professional standards of quality.	12/21/2010	01/31/2011	3 = Actual harm	Few
Make sure services provided by the nursing facility meet professional standards of quality.	12/07/2011	01/18/2012	2 = Minimal harm or potential for actual harm	Few
Make sure services provided by the nursing facility meet professional standards of quality.	11/24/2009	01/05/2010	2 = Minimal harm or potential for actual harm	Few

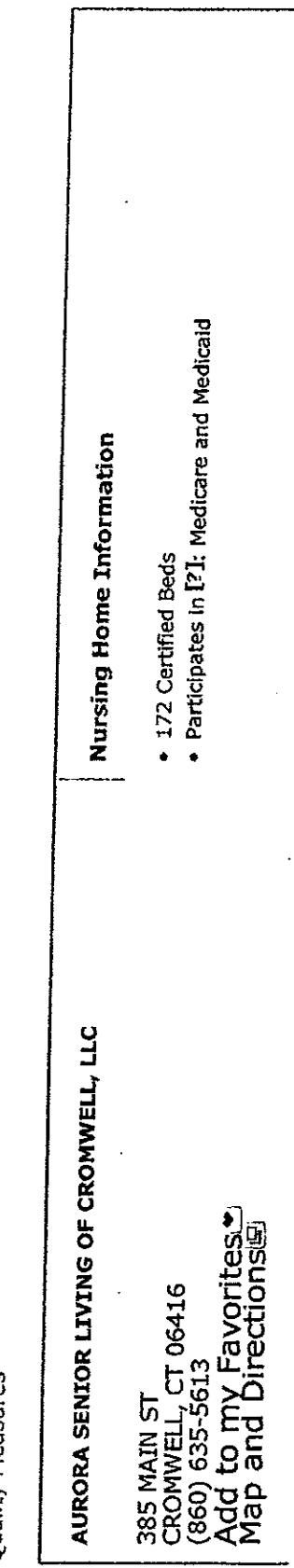
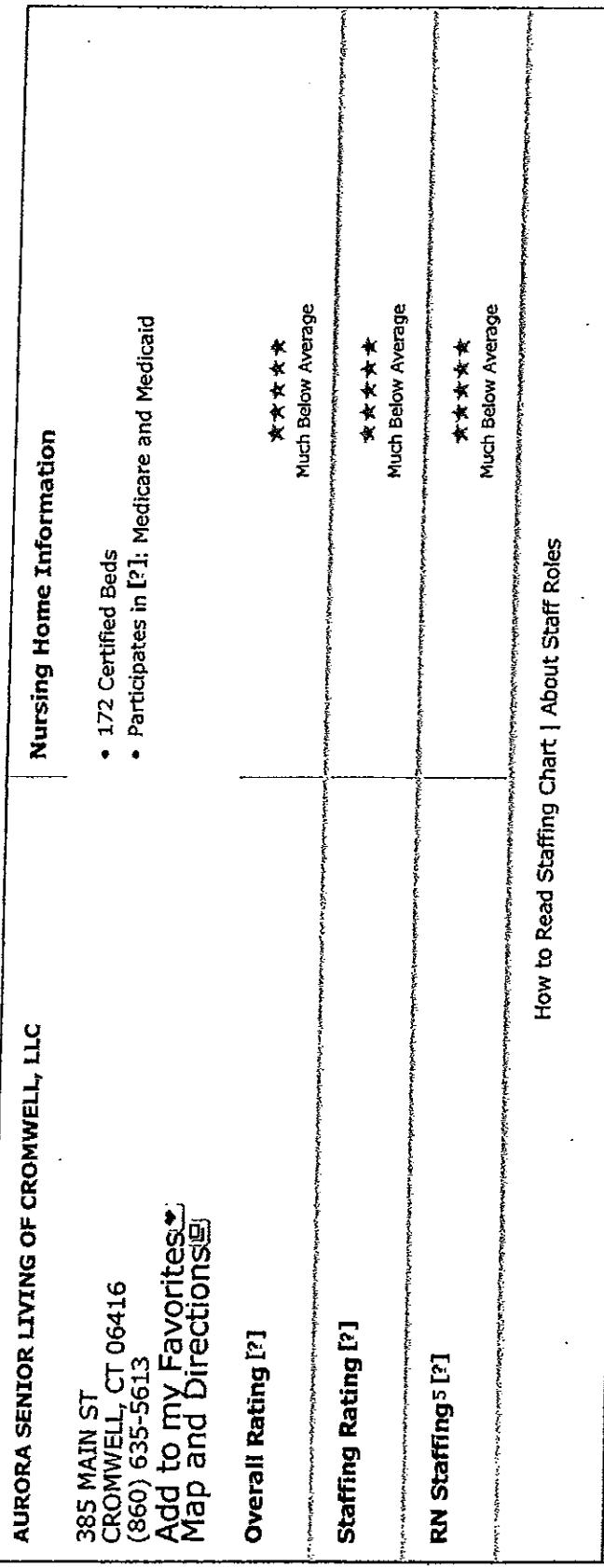
Provide care by qualified persons according to each resident's written plan of care.	12/21/2010	01/31/2011	2 = Minimal harm or potential for actual harm Few
Provide necessary care and services to maintain the highest well being of each resident .	12/21/2010	01/31/2011	2 = Minimal harm or potential for actual harm Few
Provide necessary care and services to maintain the highest well being of each resident .	11/24/2009	01/05/2010	2 = Minimal harm or potential for actual harm Few
Provide necessary care and services to maintain the highest well being of each resident .	03/13/2012	03/26/2012	3 = Actual harm Few
Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.	11/24/2009	01/05/2010	2 = Minimal harm or potential for actual harm Few
Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.	09/20/2011	10/31/2011	2 = Minimal harm or potential for actual harm Few
Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.	06/29/2012	08/10/2012	3 = Actual harm Few

Make sure that the nursing home area is free from accident hazards and risks and provides supervision to prevent avoidable accidents.	04/29/2011	06/08/2011	2 = Minimal harm or potential for actual harm	Few
Make sure that each resident gets a nutritional and well balanced diet, unless it is not possible to do so.	12/07/2011	01/18/2012	3 = Actual harm	Few
Give each resident enough fluids to keep them healthy and prevent dehydration.	12/07/2011	01/18/2012	3 = Actual harm	Few
1) Make sure that each resident's drug regimen is free from unnecessary drugs; 2) Each resident's entire drug/medication is managed and monitored to achieve highest well being.	06/29/2012	08/10/2012	2 = Minimal harm or potential for actual harm	Some
Operate and provide services according to Federal, State, and local laws and professional standards.	04/29/2011	06/08/2011	2 = Minimal harm or potential for actual harm	Few
Keep accurate, complete and organized clinical records on each resident that meet professional standards.	12/07/2011	01/18/2012	2 = Minimal harm or potential for actual harm	Few
Keep accurate, complete and organized clinical records on each resident that meet professional standards.	11/24/2009	01/05/2010	2 = Minimal harm or potential for actual harm	Few

Keep accurate, complete and organized clinical records on each resident that meet professional standards.

Staffing

09/20/2011      10/31/2011      2 = Minimal harm or potential for actual harm      Few



<b>Overall Rating [?]</b>	Much Below Average ☆☆☆
<b>Quality Measure [?]</b>	Average ☆☆☆
Penalties	

<b>AURORA SENIOR LIVING OF CROMWELL, LLC</b>			<b>Nursing Home Information</b>		
385 MAIN ST CROMWELL, CT 06416 (860) 635-5613 <a href="#">Add to my Favorites</a> <a href="#">Map and Directions</a>	• 172 Certified Beds • Participates In [?]; Medicare and Medicaid				
<b>Overall Rating [?]</b>	Much Below Average ☆☆☆				
<b>Fines [?]</b>		<b>DATE</b>			
Fines					
<b>Payment Denials [?]</b>		<b>DATE</b>			
Payment Denials					

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Data Last Updated: February 21, 2013

# Medicare.gov

The Official U.S. Government Site for Medicare

# Medicare.gov

The Official U.S. Government Site for Medicare

## Nursing Home Profile

### General Information

AURORA SENIOR LIVING OF EAST  
HARTFORD, LLC

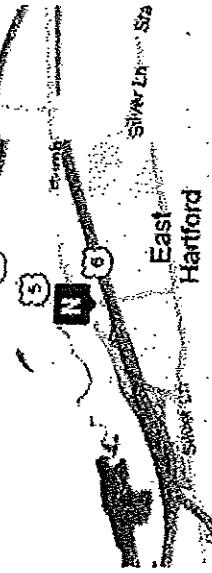
51 APPLEGATE LANE  
EAST HARTFORD, CT 06118  
(860) 568-7520

Add to my Favorites  Map and Directions 

### Nursing Home Information

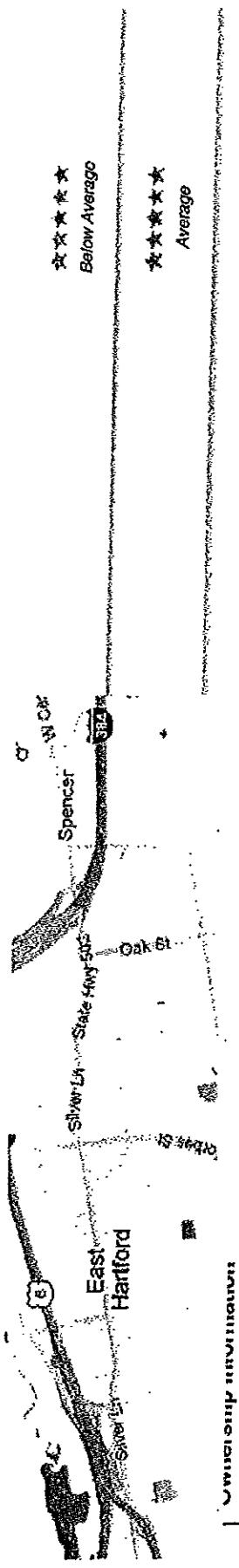
- 150 Certified Beds
- Participates in [?]: Medicare and Medicaid
- Ownership [?]: For profit - Corporation
- Not in a Hospital
- Resident Council Only

### Star Ratings Summary



### Overall Rating [?]

### Health Inspection Rating [?]



Ownership [?]: For profit - Corporation  
Legal Business Name: AURORA SENIOR LIVING OF EAST HARTFORD, LLC

[Get More Ownership Information](#)

#### Inspection Results

#### AURORA SENIOR LIVING OF EAST HARTFORD, LLC

51 APPLEGATE LANE  
EAST HARTFORD, CT 06118  
(860) 568-7520

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[Overall Rating](#) [?]

[Health Inspections](#) [?]

Date of last standard health inspection:

#### Nursing Home Information

##### Overall Rating [?]

★ ★ ★ ★  
Below Average

- 150 Certified Beds
- Participates in [?]: Medicare and Medicaid

★ ★ ★ ★  
Average

★ ★ ★ ★  
Much Below Average

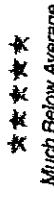
AURORA SENIOR LIVING OF EAST HARTFORD, LLC

51 APPLEGATE LANE  
EAST HARTFORD, CT 06118  
(860) 568-7520  
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Nursing Home Information

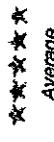
- 150 Certified Beds
- Participates in [?]: Medicare and Medicaid

Overall Rating [?]



Much Below Average

Quality Measure [?]



Average

Penalties

AURORA SENIOR LIVING OF EAST HARTFORD, LLC

51 APPLEGATE LANE  
EAST HARTFORD, CT 06118  
(860) 568-7520  
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Nursing Home Information

- 51 APPLEGATE LANE  
EAST HARTFORD, CT 06118  
(860) 568-7520  
[Add to my Favorites](#)  [Map and Directions](#) 
- 150 Certified Beds
  - Participates in [?]: Medicare and Medicaid

Overall Rating [?]



Much Below Average

Fines [?]

	DATE	AMOUNT
Fines	8/26/2010	\$1950
Fines	4/9/2010	\$2600

### Payment Denials [?]

Centers for Medicare & Medicaid Services | U.S. Department of Health and Human Services | 7500 Security Boulevard, Baltimore, MD 21244

*This nursing home has not received any payment denials in the last 3 years.*

DATE

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Data Last Updated: February 21, 2013

# Medicare.gov

A federal government website managed by the Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Baltimore, MD 21244

Medicare.gov is a service of the U.S. government. It is not affiliated with the World Health Organization or the National Institutes of Health.

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Cashier's Check

No. 4408277

Bank of America  
Date: JUNE 12, 2006

Banking Center: SOUTHBAY

Check No.: 4408277

AURORA HEALTH MANAGEMENT, LLC  
Remitter/Purchaser By:

Pay: **SEVEN HUNDRED THOUSAND DOLLARS AND 00 CENTS**

To: **FREDERICK COUNTY, MARYLAND**

Order Of: **CL**

VOID AFTER 90 DAYS

\$ **\*\*200000.00\*\***

2014-3754B 06-2006

Bank of America, N.A.  
San Antonio, Texas

Authorized Signature

**4408277**

